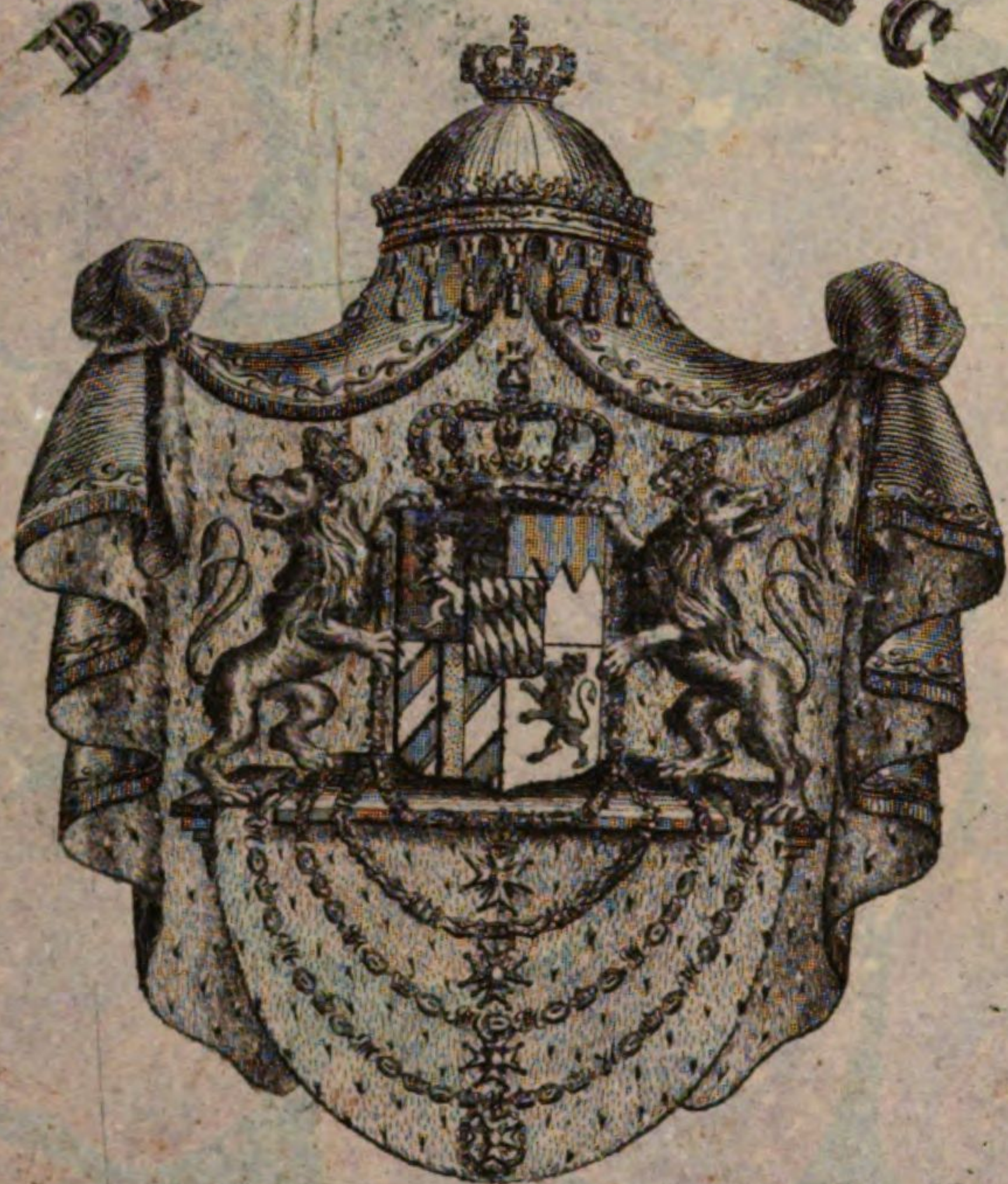
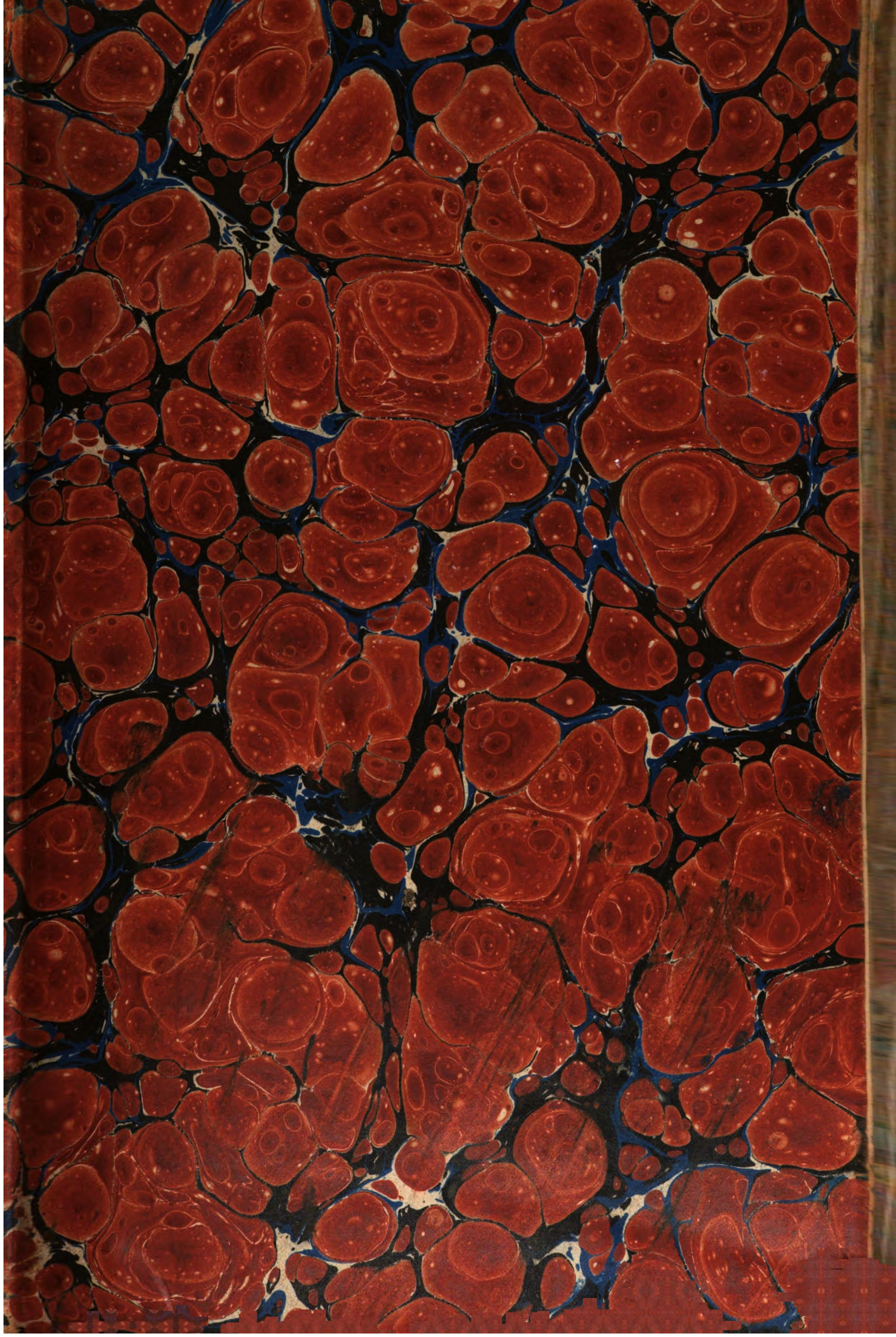




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REPORTS AND PAPERS

HOUSE OF COMMONS

Vol. 35

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SECTION

REPORTS AND PAPERS

OF THE

HOUSE OF COMMONS

Vol. 33

1880

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R E P O R T

FROM THE

SELECT COMMITTEE

ON

CONTAGIOUS FEVER IN LONDON.

Ordered, by The House of Commons, to be Printed,
20 May 1818.

REPORT

FROM THE

SELECT COMMITTEE

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CONTAGIOUS FEVER IN LONDON

Ordered by the House of Commons, to be printed, by W. P. 1843.

3

R E P O R T.

THE SELECT COMMITTEE appointed to examine into the state of CONTAGIOUS FEVER in the Metropolis, and into the condition of the Institution for the Cure and Prevention of the same; and who were empowered to report their Observations thereupon to The House, together with the MINUTES OF THE EVIDENCE taken before them;—HAVE agreed upon the following REPORT:

YOUR Committee having summoned before them physicians from the principal hospitals in the Metropolis, proceeded in the first place to inquire into the progress and extent of that contagious fever, which, during the last twelve months, has been so prevalent. In order to obtain correct information upon this subject, they called for a return of the number of patients who have been admitted into a fever hospital constructed in Pancras Road, and entitled a "House of Recovery." This establishment had its origin in the year 1802, a period of great sickness among the poorer classes of society; it having been preceded by a scarcity of food for two years. In the year 1803, 164 patients, and in that of 1804, 185 were admitted into this hospital. The return inserted in the evidence of Dr. Bateman, physician to the institution for the last fifteen years, shows that the minimum of sickness was in 1810, when 30 patients only were admitted, and that the average of the three years preceding 1817, when the present epidemic may be considered to have commenced, was somewhat more than 76 per annum; in the year 1817, 126; and from April in that year to the same period in 1818, no less than 797 persons were patients in this infirmary. Min. p. 10.

Your Committee then proceeded to inquire as to the prevalence of this contagious fever in the different hospitals of the Metropolis.

Dr. Marcet, who is one of the physicians of Guy's, informed them, that in the year 1817 about 50 patients were admitted with cases of fever; and, in that ending April 1818, 253. p. 23.

In the London Hospital, Dr. Yelloly states that the average number of fever patients may be taken at about 30 for the last five years; that in 1817, 97 cases were admitted; and in the first three months of this year, no less than 35. p. 29

Your Committee have no regular return from St. Thomas's; but Dr. Currey, physician to that hospital, says, that the number of fever cases was considerably greater than in the preceding years. p. 38.

At

Min. p. 41.
p. 42.

At St. Bartholomew's, the increase is also stated to be great, but Your Committee have no return of the numbers; for Dr. Roberts informed them, that no register is kept in the hospital to distinguish the different varieties of disease.

p. 43. At St. George's, the same statement is made by Dr. Young; and there, also, no register is kept.

p. 44. In the Westminster Hospital, Dr. Tuthill informed Your Committee that the ordinary average of fever cases may be taken at 25; while, from Lady-day 1817 to 1818, 38 patients labouring under this disease have been admitted.

p. 45. In the Middlesex Hospital, the average number of contagious fever cases is about 60 per annum; and, last year, the number amounted to 120.

Your Committee having thus ascertained the alarming increase of contagious fevers in the hospitals of the Metropolis, proceeded to examine the physicians of some of the principal dispensaries.

p. 35. Dr. Laird, physician at the Public Dispensary of Carey-street, informed them, that in the year 1815, 84 cases of fever were entered in their books; in 1816, 76 cases; and in 1817, 147; and in the four months of the present year, 59 cases of fever have been so registered.

p. 45. Dr. Clutterbuck also states, that for many years past, not above twelve cases of typhus have been admitted on their books, but in the last year there have been above 200.

App^x No. 2.

Your Committee thought fit to transmit a series of questions to the different physicians belonging to some of the dispensaries of London, and to the answers of which they beg leave to refer. Dr. Davies, physician to the London Dispensary, averages the number of cases of fever in the establishment to which he belongs, for a period of eight years, to be about 100 annually; while in the last year they amounted to 309. In the Finsbury Dispensary the mean number of fever cases is 66; but from the 1st of May 1817, to the same day 1818, 168 cases were registered. Mr. Burgess, apothecary at St. Luke's Workhouse, stated that he attends, on an average of common years, about 150 cases of fever; in the last year the number rose to 600.

Dr. Lincoln states, that his parochial patients have increased from the ordinary average of 40 and 50, to 250 and 300.

Your Committee, having thus been informed of the extent of this epidemic, and the severity with which it has fallen on the poorer classes of society, proceeded to inquire into the nature and extent of the means afforded, in the way of medical relief, to those afflicted with this calamity.

The benevolence of some individuals, aided by a considerable grant of money on the part of the Public, have constructed a fever infirmary, called "The House of Recovery," which is capable of containing about 69 patients.

This

This establishment has arisen to its extent and consequence by slow degrees ; it began in a small house in Gray's-Inn Lane, which was capable of containing only a very limited number of patients, and its augmented size is a convincing proof of its acknowledged value, no less than its being necessary to the increasing wants of the metropolis. It is supported by voluntary contributions, the amount of which may be taken at 450 *l.* per annum. This Institution possesses besides, a fund of 2,000 *l.* in Exchequer bills, and 2,682 *l.* in the 3 per cent. consols ; the annual income being thus somewhat above 540 *l.* per annum. The expenses of the three years preceding 1816, amounted annually to 573 *l.* while those of the year ending April 1818, reached the enormous sum of 1,700 *l.* ; to meet this increase of expenditure above income, the generosity of the public was appealed to, and the sum taken as part of the capital stock of the Hospital, and which is now held in Exchequer bills, was subscribed at a public meeting summoned for that purpose ; to this fund must be added a further grant of 1,000 *l.* which has recently been paid by the Treasury to this Hospital.

Min. p. 10.

p. 20.

Your Committee have learnt with great satisfaction, the nature of the excellent arrangements which have been adopted in this institution. The zeal and assiduity of its medical attendants entitle them to the praise and gratitude of all who can estimate the fortitude, the risk, and the active benevolence which characterizes the profession to which they belong. But the objects of this institution are not limited to attendance on the sick, and to the removing persons from the sphere of contagion ; a portion of its funds is expended in cleansing the apartments of the poor, who, crowded in close courts and unventilated rooms, are assailed by fever ; this practice is peculiar to this establishment, and in the last year no less than 151 rooms were thus whitewashed. Your Committee refer generally to the evidence of Dr. Bateman, to establish the necessity of a speedy removal of the poor from their own dwellings when attacked with contagious fever, as well as to demonstrate the benefits derived in the last year by the existence of this institution, when, from the crowded state of the hospitals, and their known unwillingness to receive fever cases at all, the greatest danger would have been incurred of the spreading into a larger focus the sphere of this contagious disorder. In one house, the disease continued seventeen weeks, part of the family were attacked with it three different times ; and it was only arrested by the destruction of all the furniture in the apartment. Thus it may be said, the sufferers became diseased through their own contagion ; and Your Committee cannot contemplate without serious apprehension, what might have been the result of this epidemic daily gaining strength, if it had not been checked in its malignant growth by the efforts of the Fever Institution. Your Committee wish also to remark, that this establishment is open to all applicants, at all days and hours. A medical certificate of disease is stated to be required ; but the practice is to admit all who are attacked by the complaint, upon the first application ; and the only impediment thrown in the way has been one which it is the aim of Your Committee to remove, a want of sufficient room for the admission of patients.

p. 23.

p. 46.

p. 17.

p. 13.

Your Committee wish to observe, that a most salutary system is adopted here, viz. the transport of the patients in a litter belonging to the establishment, thereby preventing the use of coaches or sedan chairs ; one of the means by which the contagion is circulated is thus checked, and they hope the other hospitals will see the necessity of adopting some such

p. 12.

arrangement. Indeed, from the indifference to contagion which seems to exist in some of these establishments, it is a matter of surprise to Your Committee that more fatal results do not occur.

Min. pp. 28,
39, 41, 43.

Your Committee have learnt with great pain, that in all the hospitals of London a great proportion of patients are weekly refused admission, in most of them from want of room; in one of them (the Middlesex Hospital) from a deficiency of funds. Any plan, therefore, that would lighten the burthen which now weigh down these establishments, would, to the minds of Your Committee, be of great public usefulness. But if the entire removal of cases of fever from all the hospitals, may be considered injurious to them as schools of medicine, the diminution of the number of such admissions might ease the finances of some establishments, and leave room in others for patients suffering under diseases of a different character.

pp. 26, 30,
38, 41, 43.

Your Committee have been informed, that it is the practice in all the hospitals to mix cases of contagious fever indiscriminately with other patients; it has, however, been stated to them by some medical authorities, that, practically speaking, no evil has arisen from their intermixture; but, with due deference to such opinions, the acknowledged fact, that in some hospitals the fever has been generated; that patients admitted under one disease have caught in the hospital another; that the medical practitioners and attendants have been attacked themselves by the disease; and that most fatal effects have been therefrom produced;—All these facts fully satisfy Your Committee that the practice above alluded to, if not altogether abandoned, ought to be resorted to with great precaution, and in a most limited extent. As long as fever cases can be diluted through a large ward, with proper attention to ventilation, scarcely any danger of contagion may arise; but in a period of epidemic, such as existed in the late and present year, when all the hospitals were crowded with patients assailed by the prevailing disease of fever, great hazard must be run, and the experience of this year has demonstrated the danger and evil of the system. As the great preservative against contagion is a free circulation of air, patients labouring under chronic disorders cannot with propriety be subjected to the same treatment, and a system of medical police which is essential in the one case to prevent the spreading of the disease, becomes highly prejudicial on the other; besides, a great prejudice prevails; and Your Committee cannot consider it as unfounded, among the poorer classes of society, who are the main objects of these establishments, against either entering themselves or sending their relations into these hospitals, on account of the hazard of infection to which they are exposed; the events of the last year are not certainly calculated to weaken these opinions, and Your Committee feel assured, that to diminish the number of fever cases in every hospital, by increasing the powers of receiving them in institutions exclusively set apart for that disease, would not only do away the impression on the public mind above alluded to, but contribute most materially to the relief and good arrangements of those hospitals, the wards of which are now exposed to be indiscriminately filled with patients labouring under diseases in all their different stages of suffering and malignity.

pp. 14, 25,
27, 28, 39.

pp. 11, 16,
24, 25.

Your Committee refrain from entering more into detail on these subjects; they refer generally to the evidence, which, to their minds, is conclusive. That evidence has demonstrated the extent of the epidemic, the probable chance of its continuance, as well as of its occasional recurrence,

rence, the small means afforded by the hospital to receive patients assailed by it, the great hazard of mixing them with those who labour under diseases of a different nature, the utility of the Fever Institution, both for the cure of the disorder, and for arresting the further progress of contagion; all these facts so made out, have satisfied Your Committee, that it would be highly expedient to extend the public aid to this establishment. And as they see no reason why the capital stock of the hospital should be augmented, they should propose a further grant of 2,000*l.* which, with the 1,000*l.* already made, will enable the institution to increase its means of accommodation to 100 patients. Taking a fair average of the fever cases in the Metropolis, this establishment will thus be enabled to receive a great proportion of the patients who now are sent to the other hospitals; and probably in ordinary times nearly the whole of the fevers of the Metropolis.

App^x No. 1.

Your Committee feel assured, that in case the fever should continue its ravages undiminished, and the same burthen which lay so heavy on the finances of this institution in the last year should exist during the present, Parliament would consent to provide some additional support; but at present they consider the sum above mentioned as sufficient, and they rely with confidence on the munificence and charity of the public to promote the ordinary annual funds, for the support of an institution so well deserving the countenance of all ranks of society. Your Committee have fully satisfied themselves, that the most beneficial effects have resulted from hospitals exclusively set apart for cases of fever. They refer generally to the accounts, to show the small income of this admirable institution, as well as the increasing demands on it; and though the benevolence of the public has done much to raise this establishment to its useful pre-eminence, yet further aid is still wanted; and your Committee wish to recommend His Majesty's Government to reconsider the grant they have already made.

Min. p. 33.

p. 20.

Your Committee, in recommending this grant of money, are aware of the general impolicy of supporting public hospitals by advances of public money; but the peculiar state of this establishment, its nature and character, the pressure on its funds, which require immediate and large addition to them; and, above all, the diseased state of the Metropolis, in respect of fever, and the probability of its malignity being increased towards the autumn, all these reasons satisfy Your Committee, that a departure from the general principle may, in this case, with safety, be adopted.

From the experience derived from the establishments at Chester, Manchester and Waterford, according to a report which has been laid before them; it appears that not only no hazard of spreading infection has been incurred, but, in point of fact, the number of contagious diseases has been greatly diminished, not only in towns, but in the very district and neighbourhood where houses of recovery have been situated. Dr. Roget, late physician to the Manchester Infirmary, informed Your Committee, that at Manchester no medical officer or attendant in the hospital has been afflicted with the fever generated within its walls; and that in the town itself the number of cases of that disease has diminished to a less degree than the ordinary average prior to the establishment of the institution. Dr. Holme, physician to the infirmary from its establishment to the present period, confirms this statement to its full extent.

p. 19.

p. 33.

Your

Your Committee cannot close this Report without expressing a regret that any hospital in the Metropolis should not possess a register of diseases: they trust this omission will speedily be rectified. And, in their opinion, it would be advisable to register, not only the diseases, but also the name and profession of the patient. It must at all times be a matter of useful knowledge to be able to learn the quality and extent of the different diseases that prevail at different periods; and Your Committee have felt the want of that information, arising out of this strange irregularity, in not being able to ascertain the average fever cases that have occurred for some years past in the Metropolis.

20 May 1818.

MINUTES OF EVIDENCE.

<i>Thomas Bateman, M. D.</i>	-	-	-	-	-	-	p. 10
<i>Richard Phillips, Esq.</i>	-	-	-	-	-	-	p. 20
<i>Mr. John Charles Matthews</i>	-	-	-	-	-	-	pp. 21 & 23
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<i>J. Yelloly, M. D.</i>	-	-	-	-	-	-	pp. 29 & 46
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<i>H. H. Southey, M. D.</i>	-	-	-	-	-	-	ib.
<i>H. Clutterbuck, M. D.</i>	-	-	-	-	-	-	p. 45
<i>Edward Holme, M. D.</i>	-	-	-	-	-	-	p. 48
<i>B. Davies, M. D.</i>	-	-	-	-	-	-	p. 50
<i>Mr. William Lincoln</i>	-	-	-	-	-	-	ib.

MINUTES OF EVIDENCE

TAKEN BEFORE THE

Select Committee on Contagious Fever in London.

Mercurii, 29^o die Aprilis 1818.

The Honourable HENRY GREY BENNET, in the Chair.

*Thomas Bateman, M. D. called in; and Examined.**T. Bateman,
M. D.*

ARE you physician to the London House of Recovery?—Yes.
Do you reside in the house?—No, I do not; I reside in Bloomsbury-square.

How long has that house been established?—The first house was opened in the beginning of the year 1802; this House of Recovery, last September twelvemonth.

Where was the first House of Recovery opened?—In Gray's-Inn Lane.

What number of patients would it hold?—It had only sixteen beds.

What was the motive for establishing that house?—The extensive prevalence of fever for several years previous.

Have you had an opportunity of ascertaining what were the principal causes, at that period, that increased epidemic diseases?—It was preceded by two years of great scarcity.

That house was calculated only to hold sixteen beds, have you a return with you of the number of patients that were admitted in that year?—The following is an account of the number of patients admitted from the year 1803 to April 1818.

[*It was read as follows:*]

INSTITUTION for the Cure and Prevention of Contagious Fever in the Metropolis.

Years :	N ^o of Patients admitted :	Died :	About one in
1803	- - - - 164	- - - - 13	- - - - 12 $\frac{1}{2}$
1804	- - - - 185	- - - - 17	- - - - 11
1805	- - - - 80	- - - - 7	- - - - 12
1806	- - - - 66	- - - - 6	- - - - 11
1807	- - - - 95	- - - - 14	- - - - 7
1808	- - - - 64	- - - - 5	- - - - 13
1809	- - - - 72	- - - - 11	- - - - 6 $\frac{1}{2}$
1810	- - - - 30	- - - - 8	- - - - 3 $\frac{1}{4}$
1811	- - - - 53	- - - - 8	- - - - 7
1812	- - - - 43	- - - - 6	- - - - 7
1813	- - - - 62	- - - - 11	- - - - 5 $\frac{1}{2}$
1814	- - - - 86	- - - - 13	- - - - 6 $\frac{1}{2}$
1815	- - - - 59	- - - - 7	- - - - 8 $\frac{1}{2}$
1816	- - - - 85	- - - - 14	- - - - 6
1817	- - - - 126	- - - - 10	- - - - 12 $\frac{1}{2}$
1818	- - - - 797	- - - - 62	- - - - 12
	<u>2,067</u>	<u>212</u>	<u>9</u>

Notwithstanding it appears by the return that the fever was considerably diminished till within the last two years, you found it convenient to change your residence from Gray's-Inn to the spot which you now inhabit?—Yes.

Where

Where is the House of Recovery now?—It is now in Pancras-road, adjoining the Small-Pox Hospital.

Does it form a part of the Small-Pox Hospital?—It is not united to it: it did formerly form a part of that establishment, but it is a distinct part of the building.

Does it form any part of the establishment, in the way of professional attendance, or the attendance of officers living within its walls?—None at all.

Your establishment then is distinct by itself?—It is.

How many beds can you now make up in that establishment?—We have now sixty-nine beds: there are two small rooms where we could accommodate ten more.

So that the Committee are to understand that you can receive between seventy and eighty patients?—At this moment we can but receive sixty-nine, the present wards not being able to receive more.

But the Committee understand you to say, with some alterations you could receive ten more patients?—Yes.

What is the number of patients that you have admitted within the last twelve months?—Seven hundred and ninety-seven.

Have you ever been obliged, in consequence of your hospital being full, to reject persons who applied to be admitted?—We have been obliged to delay their coming in for two or three days, and in one instance we rejected about a dozen.

Were those dozen applications made on one and the same day, or at different periods?—On one day, and from one quarter: it was an accidental circumstance that could hardly happen again; it was an application from the Guardian Asylum, which contains forty young women, more than half of whom were seized with fever in the course of the week.

You mean by fever, this contagious fever which has been so prevalent?—Yes.

What is the object of your Institution, and what are the terms of admission within it?—The object of the Institution is, to receive all poor patients affected with contagious fever as speedily as possible: the only requisite for admission is, a medical certificate that they are affected with a contagious fever; that is brought to the physician, according to the rules of the Institution, who immediately signs an order for the admission of the patient.

Is there a physician constantly resident in the house?—I am the only physician attached to it.

Supposing, then, you are out, and the certificate is signed, if the patient appears at the doors of the infirmary, what becomes of him?—The fact is, I do not sign the order for one in three; for I have always given an order for the matron, when they bring an order signed by a medical man, to admit them at once.

In point of fact, the Committee are to understand that the doors of this Institution are open to the poor of all parts of the metropolis; and the only condition is, that the patient should bring along with him a certificate?—Not exactly along with the patient: we do not receive them in a public carriage, we have a conveyance of our own: a certificate is brought to the house first, and we then send for the patient.

Besides the instance you have mentioned, have any others occurred in which you had not room to receive patients?—No, none.

Then the Committee are to understand, that you have uniformly received those who have come, with just the exception of this instance, and always had room; and never had occasion to refuse admission to a patient?—No, in no instance: but we have two or three times delayed their admission.

In what part of the metropolis, principally, has this fever arisen?—Principally in the eastern and north-eastern parts, Shadwell, Whitechapel, Bethnal-green, the neighbourhood of Shoreditch, the parish of St. Luke's; about Old-street and Golden-lane, Cow-cross and Saffron-hill, near Smithfield, and also St. Giles's; the neighbourhood of Clare-market and Drury-lane, and the parish of St. Clement's; and also very much in the parish of St. George's, Kent-street, and the Borough: there also have been a few patients received from the Haymarket, and the neighbourhood of Holborn and Gray's-Inn Lane.

In fact, this complaint has principally arisen in the narrow streets and lanes of the metropolis, where the poor live associated together in great numbers?—Almost exclusively.

Has it been of a character peculiarly malignant?—Not more so than the fevers I have usually witnessed; very much the same character as during the last 14 years.

Of course, greatly increased in crowded neighbourhoods?—Extremely so in the unventilated habitations of the poor.

Besides

T. Bateman,
M. D.

Besides receiving persons into the House of Recovery, is there any other object proposed by your Institution, such as relates to cleaning and whitewashing, and assisting to ventilate the habitations of the poor?—We have an officer, called an inspector, who visits all the apartments from which patients are brought, to fumigate them, and to order such of them to be whitewashed where it can be done.

Do you recollect the case of the workhouse of Shadwell, in the year 1812, in which a typhus fever of very malignant character broke out?—Yes, perfectly; I went there on that occasion.

Did the contagion of that fever spread in those crowded courts which are in the neighbourhood of Field-lane and Saffron-hill?—I am not sure that I can speak as to that time; according to my recollection, it has frequently appeared about Saffron-hill when it has not appeared anywhere else.

Did you at this time cleanse, ventilate, or fumigate the apartments out of which patients had been removed?—Yes.

Have you whitewashed the apartments of those patients who have been removed into the establishment during the last year?—As far as could be done, I believe; probably the number is not very considerable, because a great number came from the workhouses.

What do you do when you fumigate; what is it you mean by that term?—We apply the vapours of the nitrous acid.

Do you find the application of those vapours attended with good effect?—I have no doubt of it; I only recollect one instance in which the fumigation appears not to have stopped the contagion.

Have you had many instances of whole families, or greater part of families, being brought into your establishment this year?—A great many; to the extent of eight or nine together.

What is the extent of the establishment of officers in the house?—There are no officers residing in the house.

You must have nurses, or what are called matrons?—There is a matron, and I believe four nurses in the house.

Is there any apothecary who attends in the house, or do you mix up the medicines that you send to the patients?—There is an apothecary who attends daily; after my visit, there is also a porter who resides in the house, and is one of the two men employed to convey patients, and another is hired when wanted.

What is the nature of the conveyance you use to convey the patients to this House of Recovery?—A covered litter carried by two men.

Have you had in your hospital any instances of the nurses or medical attendants suffering from a fever?—Yes; three of the nurses and the matron have suffered, and had a fever, within these last twelve months.

Did they all recover?—Yes.

Have the goodness to describe to the Committee the nature of the litter in which they are carried?—It is a wooden litter, with a moveable lining.

Is the lining linen?—I believe it is.

So that it might be washed after the patient was taken out?—Yes.

That is so in point of fact?—Yes.

Is he conveyed in any particular attitude?—They always lie horizontally, which I believe to be the best posture in which a patient can be conveyed; it is certainly the least fatiguing.

Can you give any information as to the progress or diminution of fever in the metropolis within these few years past?—I have of course attended to the progress for 14 years back; and it has appeared to me, that there always has been in the autumnal season a disposition to the increase of contagious fever, and that it has generally subsided towards December, and prevailed very little during the winter: it generally appears slightly in the spring; but it is chiefly in the autumn that it is most prevalent.

Till within these last two remarkable years, has that species of disease been on the increase or decline?—I should not think regularly, either on the increase or decline; the smallest number of patients that were brought to the house was in 1809; since then, it has been greater than it was that year.

Is the establishment of your institution known so generally throughout the different parishes of the metropolis, that the persons who have the management of poor-houses, as well as the poor themselves, are acquainted with this establishment, so that in case of illness they would apply to you for relief?—I think that was not the case till the present year.

Then,

Then, do you think that the number of patients which you have received is at all a criterion of the number of patients who wanted relief, or is it not rather a criterion that your establishment was not generally known?—I am persuaded that it is a criterion of the state of fever, because I have been for the same number of years (that is 15 years) physician to a public dispensary which includes the worst districts of Saffron Hill, Gray's-Inn Lane and St. Giles', and during that period fever has prevailed in the same comparative extent in the practice of the dispensary.

Do you think that the establishment of this House of Recovery has been one of the means, and an effectual one, of stopping the further progress of those contagious fevers which you state are produced every year in the metropolis?—I have very little doubt of it, because there appears to me to be less fever among the poor in the practice of the public dispensary since the establishment of that institution, than there was 20 years before; I collect that from the Reports of Dr. Willan, who published Reports of the State of Diseases among the Poor for several years before the establishment of this Institution, as well as from the Bills of Mortality.

Do you think that the extraordinary statement which the Committee see before them as to the diminution of cases, which is extracted from the Bills of Mortality, beginning at the year 1801, and ending in the year 1811, is to be relied on?—I think, in the main, it must be true.

Do you attribute any considerable portion of that great diminution of the disease, which is in a ratio of 2,908 in 1801, to 906 in 1811, to the establishment of this Fever Institution?—I think but a small proportion of that change can have been produced by the efforts of the Fever Institution.

Supposing the Fever Institution not to have been established, and from your knowledge as to the state of the other great hospitals in the metropolis, do you not think, from what you have known as to the extent of the disease during the last year, that the progress of it would have been most alarmingly increased?—Yes, I do, certainly.

You have informed the Committee that the house now holds 69 beds, and that you could by some alterations add 10 more; can you give the Committee any information, supposing the number of persons that are now sent to the different hospitals in London with contagious fevers, were transferred to you, whether you think that the house, with some alteration, would be capable of holding them?—I should think that something less than double the number that the house will now hold would comprise all the patients that were in all the hospitals at the same time.

From what you have learnt as to the average state of cases of contagious fever in the six great hospitals in London, you would think that if there were from 150 to 160 beds in your hospital, it would be sufficient to take in all the average cases of contagious fever in the metropolis?—I should think it would; supposing all the poor people had come out of the hospitals to the fever house, there probably would not have been more than 160 patients in it at the same time.

The Committee then are to understand, that supposing those persons who had been admitted into the hospitals had, instead of going there, come to your establishment, they never would have been, in an average year, more than from 150 to 160?—I mean during this epidemic, and not in an average year.

Can you give the Committee any information as to what would be the amount on an average year?—Taking the same proportion of doubling the number in the fever house, it would not amount to twenty at any one time.

Cast your eye over your statement of the number of admissions for the last ten years, and inform the Committee what is the average number of persons you have had in your house during the whole year?—I took the average, a short time since, for ten years, the number for the whole ten years was 634, which was about 63 annually. I took the ten years preceding the beginning of this epidemic, not including that epidemic.

How many persons have you known at one time before the epidemic, taking an equal number of years?—We have been sometimes several weeks without a patient at all, and seldom had more than four or five at a time. I do not think I remember the whole house being full, before the epidemic, since I have been physician to it.

You have stated, that about 160 patients would be the greatest number, according to the information you have received, at any one period during the epidemic, who would have applied, supposing that you had taken in, not merely those that you did take in, but also those who were admitted to the other hospitals in the metropolis?—I should think so.

Should you think, that if your establishment was increased so that you could

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make permanent beds to the amount of 120, with a power of increasing them to 150 or 160, that your hospital could take in all the cases of fever that are now sent to the different hospitals in the metropolis?—I should think it would, but I have not very recently heard what is the number in the hospitals.

From what you have seen and heard, do you think that the mixture of those fever cases with different diseases in the hospital, is often productive of very bad consequences?—I think it often spreads; I believe so.

Have you not in those establishments that are devoted solely to fevers, a method of management, the great object of which is, to prevent the spreading of the complaint?—We have no such mode of management, except extreme cleanliness and free ventilation.

Is that mode of management applicable in other hospitals where those fever cases are mixed up with patients attacked by diseases of every description, that are placed there?—That is impossible; for it is obvious that patients in chronic diseases cannot bear so much cold as those in fever.

The Committee then are to understand that it is your opinion, that, in the one case, namely, where they are mixed up, new fevers may be created, in consequence of that system of ventilation not being adopted which is adopted in the case of the fever hospital?—Yes.

Have you had many applications from the masters of poor-houses to receive patients in your establishment?—A great many.

Were you ever obliged, except in the instance of the Guardian Society, to refuse such applications?—We have been obliged, in some instances, to delay the admission.

Do you know whether in many of those large poor-houses they have a fever hospital?—I think, only in two; the workhouse of St. Pancras and St. Giles.

Do you happen to know whether in any of those poor-houses the fever has spread to a great degree?—I only know from the reports of patients who came from them, who have stated, that they have spread considerably.

When a patient arrives at your house, what do you do with him?—He is immediately stripped and washed, all his clothes removed, and clean linen put on, and he is put into a clean bed.

What becomes of his clothes?—His clothes are taken to the wash-house, and those that can be washed, are washed, and the others are fumigated.

Do you bake them?—We fumigate them with the acid. I think it is a defect in the institution that the funds have not been adequate to renew them, when required.

Is the Committee to understand by your last answer, that you consider it a great object to destroy the clothes, and to give the patients, on their departure, new ones?—In many cases I think it would be desirable to destroy the clothes and the bedding too, and give them new ones. I have seen some striking instances which would corroborate that statement.

Do you mean by the bedding that which belongs to the institution, or the bedding of the parties from which they have been removed?—I mean the bedding which they have left at home.

You have mentioned, that you have seen some striking instances as to the evil arising from such bedding not having been destroyed?—I allude particularly to an instance to be found in the annual report, which occurred in a family in Hatfield-street, St. Luke's; the fever continued 17 weeks in the family, attacking both the father and the daughter three times successively; it was only arrested after the application of our inspector to the parish officers, who gave them new clothing and bedding.

So that it appears, that in this case the individuals who had the fever more than once, may be said to have caught it from their own contagion?—Most probably.

Is it the practice of your inspector, when he goes to bring a patient from a private family to your establishment, to give directions to that family how they can secure themselves against infection?—The inspector generally goes himself, and commonly applies the fumigation himself, or directs them how to do it; he either does it, or directs the family how to use it.

In the institution of which you have been speaking, has there not been money received in the way of subscription from different workhouses, to entitle them to send contagious fever patients there?—There has been money received, but not to entitle them. Some of the workhouses have given two guineas with each patient, and some of them have subscribed liberally, in consequence of having had patients received from them.

Do you consider that patients from those workhouses or parishes, have thereby a better

better claim to admittance, than any poor person who knocks at your door, and asks for admission, complying with the rules of your establishment?—Not at all. I have rather given the preference to the poor persons, when they have applied.

One of the principal rules is, for the inspector to attend to certain regulations respecting the cleansing of infected apartments, and for purifying or destroying, and replacing infected clothing and bedding; does your inspector do all this?—I think it is a great desideratum in our establishment, if we had funds to supply clothes and bedding. With respect to whitewashing, fumigating, and general cleansing, the inspector does all that he can, and he leaves a paper, which contains printed rules, to be observed in houses where contagion exists.

Is it your custom to limit the admission of patients to certain days?—At all the general hospitals, patients are admitted only once a week, with the exception of accidents.

In the House of Recovery you admit them immediately?—Immediately.

Do you happen to know whether there are any pains taken at hospitals with regard to fumigating and cleansing the habitations of the persons removed?—Certainly not; they pay no attention to the external circumstances.

Is it not probable, in case of typhus fever, that any delay might be fatal to the patient?—It is extremely dangerous, and is one of the causes of the greater mortality of fever in the great hospitals in London, and even in the fever hospital itself.

Can you give the Committee any account as to the mortality arising from fever some years back in the metropolis, whether it was not considerably greater than within those two years of epidemic?—I have no other knowledge of this subject than is to be obtained from the bills of mortality.

Do you bear in mind what the difference is?—No, I do not.

Something very considerable?—Something very considerable; in the last year in our establishment the mortality was one case in twelve and a half.

Under whose direction is your establishment?—Under the immediate direction of a general committee of subscribers, and of two directors, who are elected monthly out of their body.

Do they inspect the hospital occasionally?—I believe they do; but their duty relates principally to the domestic management of the hospital.

What do you mean by domestic management?—The supply of necessaries, such as clothing, bedding and washing, paying the servants, and so on.

Is there any one that attends to see that the different persons connected with the establishment perform their respective duties?—That is the business of the directors.

Is that attendance regular and constant?—It is constant, but not regular; that is to say, not at fixed hours.

Do you attend yourself daily?—Yes, daily.

And of course, in difficult cases, more than once?—I never attended more than once; the apothecary attends in the after-part of the day. I never attend more than once.

But you make it a part of your duty, which is punctually performed, and see all the patients daily?—Yes, most punctually.

Is not the mortality of one in twelve considerably more than may be taken as an ordinary average?—It is not more than the ordinary average that has been observed in the hospitals of this country, but it is considerably more than the average that is stated of the fever hospitals in Ireland; which I believe to arise from the circumstance of the great number of very aged paupers which have been sent in from the workhouses here in a dying state; and from the circumstance that, in Ireland, very slight cases are sent in immediately, in consequence of the very great alarm; in general the cases are sent in earlier in Ireland than in this country.

Have you sufficient conveniences in your establishment for convalescent patients?—No, we certainly want accommodation for convalescents.

The Committee see in the Returns, that the mortality in 1815 was one in nine, and in 1816 it was one in six; is not the comparative mortality less in a year of epidemic than in ordinary years?—It is always so, and I believe chiefly in consequence of the circumstance that, where no epidemic prevails, it is only the very bad cases that are sent to the hospital.

With the permission of the Committee, I would wish to annex to my evidence the Sixteenth Report of the Institution for the Cure and Prevention of Contagious Fevers.

[It was read, as follows:]

Sixteenth

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Sixteenth Report of the Institution for the Cure and Prevention of Contagious Fevers in the Metropolis.

April 24, 1818.

Remained in the house, April 25th 1817	-	-	-	-	-	-	16
Admitted since, in typhus	-	-	-	-	-	760	} 781
- - - - - in scarlet fever	-	-	-	-	-	21	
							797
Dismissed cured	-	-	-	-	-	-	695
- - - - as improper	-	-	-	-	-	-	1
Died	-	-	-	-	-	-	62
Remain in the house	-	-	-	-	-	-	39
							797
Total number of the Patients admitted since the opening of the							
House of Recovery in 1802							2,113

It was stated in the last annual Report, that contagious fever had begun to spread among the poor of the eastern parts of the Metropolis, during the winter, to an unusual extent, and was likely, under the existing circumstances of scarcity and general distress, to become epidemic. It will be manifest, from the numbers of the preceding statement, that this anticipation has been fully verified, and that an epidemic fever has prevailed, and indeed continues to prevail among the poor of this Metropolis, to an extent quite unprecedented in the annals of this institution, and probably much exceeding that which occurred subsequently to the scarcity of 1799 and 1800, which demanded the establishment of a House of Recovery, and gave origin to this valuable charity. In fact, the number of patients admitted in the past year exceeds the total number admitted in the course of the subsequent twelve years. On the present melancholy occasion, the fever was first observed to spread in the close and crowded alleys of the eastern and north-eastern parts of the town, especially in Shadwell, Whitechapel, about Shoreditch, Old-street Road, Clerkenwell, and the filthy receptacles of poverty about Saffron-hill and near Smithfield. In consequence of the over-crowded state of the workhouses in all these districts, and from the necessity under which they were daily compelled to receive inmates already infected, from the streets, or their deserted habitations, those places became early the seats of much contagion; which though greatly checked and subdued by the speedy removal of the infected to the House of Recovery, and other means, was continually kept up or reproduced, by successive importations of the sick from without; for during the summer and autumnal months, especially from July to November, the fever was unceasingly generated in the private habitations of the poor, in the districts already mentioned. It became also very prevalent in the parishes of St. George and St. Saviour, in the vicinity of Kent-street, Southwark; and at length occurred partially in various other parts of the town; so that many individuals were received into the House of Recovery, from the courts about Shoe-lane and Fleet-market, Holborn, Gray's-Inn Lane, Blackfriars, Chancery-lane, Clare-market, and other parts of the parish of St. Clement's, from the Strand and the Haymarket; and in the month of December it reached the parish of St. Giles; that notorious resort of paupers of every description having hitherto nearly escaped the infection. In Somers Town also, and other parts of the parish of St. Pancras, as well as in its workhouse, the contagion has pretty constantly prevailed, and it has even reached Newington, Walworth, Hackney, Hampstead and other places in the immediate vicinity, from which several patients have been sent to the House of Recovery.

The extent and general prevalence of this epidemic fever, will however be still more manifest, when it is added, that from the month of July last to the present time, there has been such a constant influx of the infected from all these districts, that not only the wards of the House of Recovery, appropriated to typhus, but those also set apart for scarlet fever, have been almost constantly filled. During the autumnal months, indeed, the number of admissions amounted to 22 or 23 weekly; and that of the patients in the house generally to about 60, a number nearly equal to the annual average of the preceding 12 years. On two or three occasions, indeed, it has happened that patients have been temporarily excluded for want of room.

The rapid progress and extent of this epidemic, cannot indeed be deemed a matter of surprise, when the circumstances now to be mentioned, indicative of its infectious

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(16th Report of
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infectious character, are considered. It has seldom limited its attacks to one individual of a family in which it appeared, unless that individual were promptly removed, and measures of prevention adopted; and when these have been rejected or omitted, it has not only gone through the whole family, and seized their visitors and attendants, but has protracted their sufferings by repeated relapses, and proved ultimately very destructive.

The following instances of its malignant influence constitute but a small portion of the evidence, which the experience of the past year affords, of the contagious quality of the prevailing epidemic, and of the miseries inflicted by it upon many poor families: for a great majority of the cases brought to the House of Recovery, consisted of two or more individuals of the same family, or occupants of the same house.

A decent poor family of German extraction, residing in Castle Court, Fullwood's Rents, Holborn, applied to the Public Dispensary, when the father was found dangerously ill with fever, from which the mother and eldest daughter were recovering; two little girls having yet escaped it. They declined being removed to the House of Recovery, till the father died; the mother and sister relapsed, and the two younger girls were attacked, when they were admitted into the house. These four were soon followed to the house by two sons and two daughters, who had caught the infection by visiting the others in Fullwood's Rents. After a slow convalescence, and an interruption to their occupations of many weeks, they were dismissed in health.

In another family residing in a court in Saffron Hill, the contagion also seized nine, four of whom were at length sent to the House of Recovery. The mother caught it by visiting her son-in-law, and communicated it to her daughter who attended her, from whom it passed to the father and the four young persons just mentioned, and to a cousin who visited them. In another poor family living in Hatfield-street, St. Luke's, the fever occasioned extreme distress, and ultimately proved fatal to the father and eldest son: after subsisting seventeen weeks among them, one daughter having been three times in the House of Recovery, and the father, perished there, exhausted by a third attack. The fever was only at length arrested in this wretched family by a renewal of their clothes and bedding by the parish, on the application of the inspector of the Fever Institution, whose active exertions in fumigating and lime-washing had proved inadequate to destroy the contagion. From Clerkenwell, a family of six persons, father, mother, and four children, were admitted at the same time; the wife's mother being left at home convalescent; and a second family from the same neighbourhood, consisting of five persons, a man, his wife, and three children, were sent in, in the following month, and soon after a young woman who had kindly given her services to them as an attendant. From the workhouses of Whitechapel, St. Sepulchre, St. Pancras, St. Clement's, and St. George's, Southwark, patients to the number of five, six, and seven, have frequently been received together. One house in Saffron-hill supplied eight patients from its different apartments; one in Tash Court; Gray's-Inn Lane, four; and from three or four houses in St. Giles's, upwards of twenty patients were admitted in the course of a month. The instance in which two, three, and four members of the same family have been taken to the House of Recovery together, or in rapid succession, are extremely numerous. But it is unnecessary to detail any further proofs of the activity of the contagion of this fever; indeed, even under its mildest form, and under circumstances where no defect of cleanliness and ventilation existed, it spread with considerable rapidity, and spared few individuals exposed to its influence. For having appeared in an asylum containing forty young women, it seized nearly the whole of the number in rapid succession, though from the general mildness of the attack, and in consequence of the prompt and judicious treatment pursued by the physician, its symptoms were slight, and soon terminated favourably. A considerable number of these patients were received into the House of Recovery.

It would be impossible to calculate the extent to which such a calamity would probably spread in the crowded population of this metropolis, if no means were practised to check the progress of contagion, if it were allowed to accumulate in every house and alley into which it is introduced; and thus to multiply itself from every successive family that fell sick, as from a new centre. Yet such must be the progress of every infectious fever, unless measures for actually destroying the contagion as it is generated are employed, in addition to the removal of the persons of the sick from the places which they have contaminated: the value of an institution

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then, which is actively engaged in the performance of this important public service, under the present circumstances, cannot be too highly estimated. It is difficult indeed to apportion its due credit to any system of preventive measures, since neither the extent nor the severity of the evil anticipated, can be so well known as if it had been suffered: but when it is considered, that within the last twelve months nearly eight hundred persons, affected with contagious fever, have been separated from those who were in danger of being infected by them, more than thirty of whom were servants from respectable families,—that all their apparel has been purified,—all their apartments fumigated,—and upwards of one hundred and fifty of the latter lime-washed,—and that most of the large workhouses have been repeatedly enabled to clear their wards of infection, as it successively appeared in them,—it cannot be doubted that a very important check has been given to the progress of this public calamity; and that the sufferings which it would have inflicted, have been in no small degree prevented by the continued active exertions of this institution. It surely cannot therefore be necessary to press upon the attention of the public, the urgent claims of an institution thus actively and efficiently occupied in staying the progress, and in mitigating the severity of a pressing evil which may reach the bosom of every family; which indeed has already not been limited to the habitations of poverty, and which is continuing its course with little remission, even during a season usually unfavourable to the progress of fever, and is therefore likely to be again aggravated by the return of autumn.

[The following paper was delivered in, and read.]

Copy of a Letter from the Committee for preventing Infectious Fevers in the Metropolis, to the Secretary of the Treasury, on the subject of the erection of an House of Recovery in Cold Bath Fields.

Sir,

Cavendish Square, March 9, 1812.

WE have to acknowledge the receipt of your letter, accompanied by a copy of Mr. Beckett's, and of the resolution of the magistrates of the Middlesex general sessions. In order to give a satisfactory answer, it will be necessary for us to enter into some detail on the subject.

The misery and mortality attendant on fever have been long severely felt in this metropolis, as well as in Dublin, Manchester, and other populous towns. The deaths from this cause alone (as appears by the Bills of Mortality) have amounted, in London and Westminster, to an average of 3,188 persons every year, during the preceding century; and this has been attended not only with great suffering to those who have thus perished, and with broken health and enfeebled constitutions to many of those who have survived, but it has been the means of preserving febrile infection constantly, in certain neglected parts of the metropolis.

In 1783 the evil was noticed in Chester; and fever wards were established in the infirmary there, by Dr. Haygarth: these were followed by regulations to prevent the spreading of fever, adopted at Bury and Ashton-under-Line; and in 1796, by the establishment of an House of Recovery at Manchester; the effects of which, so striking and so beneficial to that populous town, are detailed in the second, third, fourth, and fifth volumes of the Reports of our Society for bettering the condition of the Poor.

The subject had very early attracted the attention of the society, and in the year 1800 a subscription was opened and a Fever Institution established in the metropolis. A small house was engaged in Constitution Row, Gray's-Inn Lane, and as it immediately adjoined upon inhabited houses in the same row, Sir Walter Farquhar and seven other eminent physicians of the metropolis, were referred to on the subject. Their unanimous opinion (a copy of which we enclose), was given to our society, that there was no reasonable ground of apprehension on the part of the neighbouring inhabitants. The House of Recovery has since continued there for ten years, not only without any inconvenience, but with a removal of those unfounded apprehensions which induced the neighbours, at first, to make two ineffectual applications to the sessions for its removal as a nuisance.

The beneficial effects of the House of Recovery in Gray's-Inn Lane have surpassed all expectation; the early removal of fever patients from their own habitations, and the consequent prevention of infection; the improved method of treating typhus fever; and the cleansing, purifying, and whitewashing the habitations of the poor, in those parts of the metropolis where infection peculiarly prevailed, have nearly annihilated this disease in London and Westminster, and do, at present, afford

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afford reasonable ground to hope, that without gross neglect and inattention, it is likely never again to be a prevalent or fatal disease in the metropolis. The House of Recovery is sometimes without a single patient in it, and there has been seldom more than four or five patients, and never more than seven at any one time, during the last four years. In consequence of these salutary measures, we have the authority of the Bills of Mortality to state, that from an annual destruction of 3,188 lives by this pestilential scourge, (which is the average of the preceding century,) the mortality has been reduced in the year 1811 to only 906; and what is very striking, the reduction has taken place under an increase of population, and has been gradual and progressive from the establishment of the House of Recovery in Gray's-Inn Lane in 1801, as will appear from the following statement of deaths, by fever, during the present century, extracted from the Bills of Mortality:

(Letter from the Committee for preventing infectious Fevers in the Metropolis.)

In 1801	-	-	2,908.	In 1807	-	-	1,033.
In 1802	-	-	2,201.	In 1808	-	-	1,168.
In 1803	-	-	2,326.	In 1809	-	-	1,066.
In 1804	-	-	1,702.	In 1810	-	-	1,139.
In 1805	-	-	1,307.	In 1811	-	-	906.
In 1806	-	-	1,332.				

Impressed with these considerations, we are certainly very desirous of establishing a permanent House of Recovery, for the benefit of the metropolis; and we are most anxious that the protection and preservation of its inhabitants from this fatal and calamitous disease may not depend merely on the duration of the short term in a small house in Gray's-Inn Lane, held at present by a lease to one of our members; but that in this metropolis, as well as in Dublin, Cork, Waterford, Manchester, and other places, a fitting and lasting establishment be formed for the security of the inhabitants. We had indeed flattered ourselves that the large and commodious space of the proposed situation in Cold Bath Fields, insulated as it is on every side, would not only be admitted to be locally and peculiarly convenient, but would be considered as in all respects perfectly unexceptionable.

We cannot help wishing, that before the resolution in question had been adopted, the Faculty had been consulted with regard to the nature and validity of the objection. With regard to the space over which febrile infection may be conveyed in the open air, physicians agree, that it cannot be communicated at the distance of five feet. The proposed House of Recovery is intended to be placed in the centre of the piece of ground contracted for, so as to be at least ten feet from the outer wall of the ground. Taking therefore the dimensions stated by the magistrates to be correct, it will appear that there will be a distance of 43 feet between the proposed House of Recovery and any other building whatever; and that between the proposed House of Recovery and the House of Correction, there will be the distance of 151 feet; from an admeasurement of the ground, however, which we have had made, it will appear that the distances are considerably more.

We shall therefore flatter ourselves, that before any weight is given to the objection to the proposed House of Recovery, on account of local situation, their Lordships will deem it right that some medical opinions should be produced, in order to show that it may be possible for the House of Correction, or the neighbouring houses, to be injured or endangered in any degree by the proposed application of this insulated and airy piece of ground to the establishment of a house of recovery for protecting the inhabitants of the metropolis from the ravages of infectious fever.

We are, Sir,
Your very obedient servants,

*S. Dunelm,
N. Vansittart,
T. Bernard.*

Copy of the Report referred to in the preceding Letter, being signed by Sir Walter Farquhar, Dr. Garthshore, Dr. Latham, Dr. Lettsom, Dr. Cocke, Dr. Willan, Dr. Stanger, and Dr. Murray, and dated Nov. 17, 1801.

FROM the experience of Chester, Manchester, Waterford, and other places where houses for the reception of persons in fever have been established, we are satisfied that the number of contagious fevers has been greatly diminished, not only in towns, but

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M. D.*

(Letter from the
Committee for pre-
venting Infectious
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Metropolis.)

but in the very district and neighbourhood where houses of recovery have been situated. From this circumstance, therefore, as well as from our own knowledge, and the statement of those who have the best means of observation, we are of opinion, that the proper and necessary regulations for the internal management of the house in Gray's-Inn Lane Road being adopted, there will be no reasonable ground of apprehension on the part of the neighbouring inhabitants; on the contrary, we believe, that there will be much less danger of the atmosphere in that neighbourhood being infected by the proposed House of Recovery, than there now is in the populous districts of the town, from the prevalence of fever in workhouses, or in the habitations of the poor.

At the same time we cannot help suggesting to the committee, that the present establishment will not in itself be adequate to the general relief of our extensive metropolis, although the measure is, in our opinion, of the utmost importance and necessity, and is imperiously called for by the present situation of this great city; yet we conceive that it cannot be effectually carried into execution without the assistance of Government in aid of private donations, and of such parochial contributions as the good sense or particular circumstances of some parishes may induce them to supply. In a national as well as a municipal view, there is hardly any object of more consequence, or which ought, in our opinion, to be more generally the concern of all ranks of people, of the rich as well as the poor, than the adoption of measures for checking the progress of infectious fever, so as to prevent its diffusing itself from unknown and unexamined sources, and spreading desolation through the whole town, and thereby unavoidably affecting many parts of the kingdom at large. The preservatives against this calamity are now generally and practically known: experience has afforded the most unequivocal and satisfactory evidence in their favour; and while other places within the British Isles, with far more limited resources, have successfully adopted means of remedy and prevention against this evil, we cannot but express our confident hope that the opulent cities of London and Westminster will not be backward in imitating so wise and so benevolent an example.

Richard Phillips, Esquire, called in; and Examined.

*Richard Phillips,
Esq.*

YOU are one of the treasurers of the establishment?—I am.

From what source are the funds derived that support it?—Donations, legacies, and annual subscriptions.

Have you got with you an account of the funds of the society for some years back, and from what sources they arise?—Please to see the following paper, containing a statement of the receipts and expenditure of the Institution for the Cure and Prevention of Contagious Fever in the Metropolis, from 4th Month (April) 1812, to 5th Month (May) 1817.

	Annual Subscriptions and Donations.			Donations under £50.			Total Amount of Annual Subscriptions, Dividends and Donations, under £50.			Expenses of the Institution.			Donations and Legacies, amounting to £.50 and upwards, to be invested according to the Rules of the Institution.		
	£.	s.	d.	£.	s.	d.	£.	s.	d.	£.	s.	d.	£.	s.	d.
1812 - - 1813	468.	13.	0.	21.	0.	0.	489.	13.	0.	474.	4.	0.	—		
1813 - - 1814	415.	11.	0.	69.	1.	0.	484.	12.	0.	518.	5.	4½	100.	0.	0.
1814 - - 1815	420.	17.	0.	83.	10.	0.	504.	7.	0.	544.	3.	1.	300.	0.	0.
1815 - - 1816	437.	15.	5.	63.	6.	0.	501.	1.	5.	521.	13.	4.	—		
1816 - - 1817	447.	11.	5.	96.	11.	0.	544.	2.	5.	652.	9.	1¼	—		

FUNDS, 1818:

Stock, 3-per-cent. Consols	-	-	-	£.2,682.	16.	10.
Exchequer Bills	-	-	-	2,000.	0.	0.

In

*Richard Phillips,
Esq.*

In this account of income, is the interest of stock included?—It is.

Can you give to the Committee an account of the income for the year ending with April 1818, when your year ends?—I am not qualified to give that account, having been eight months of that year out of town, and that during the most active part. I have been furnished with an account of the expenditure, which amounts to upwards of 1,530*l.* exclusive of 170*l.* paid for printing, and various other expenses relating to the public meeting on 21st of the 11th month (November) 1817; and for clerks, advertising subscriptions, committee room, &c.

During the last year, when the expenses of the institution were so much greater than in any former year, were any means used to procure an additional sum of money?—Various means were used.

Amongst other means, was there not a meeting held at the Mansion House?—There was.

Was there not a considerable sum of money raised?—There was, either in the meeting, or in consequence of it.

Is this sum of 2,000*l.* held in Exchequer Bills part of that subscription?—It is.

Has not the difference between that amount, and the sum that was subscribed, been expended in the payment of debts, and the removing from the establishment the difficulties under which it laboured?—It has; previous to such exertions, only a few pounds remained applicable to meet the great and increasing expense of the institution.

What are the principal articles of expense?—The chief article is the support of the house.

Do you mean by that, medicine?—Very little medicine is used; that is amongst the least expensive articles; clothing, I believe, is not much.

Bedding?—Bedding of late has been expensive; but house-keeping is the principal expense.

Is any sum paid to the medical attendants?—We pay the apothecary a salary of 30*l.* a year, and a gratuity to the physician of 50 guineas; but this year the gratuity has been increased to 100 guineas, in consequence of extra exertions.

Does the apothecary find drugs?—No.

Then the Committee are to understand, that for the sum of 50 guineas a year on an average, Doctor Bateman gives a daily attendance in that hospital?—Either by himself or assistant, by himself when he is not disabled by illness; it is only within the last twelve months, we have had an assistant physician.

Can you state to the Committee what has been the average of the monthly expenditure during the epidemic?—I cannot; the inspector not being required to furnish me with a weekly account, which is audited by the directors, and during the prevalence of the epidemic, I was absent from London.

Mr. John Charles Matthews, called in; and Examined.

WHAT situation do you hold at the Fever Institution?—Inspector and collector.

What are your principal duties?—My principal duties are to attend to the house, and to fumigate and see to the whitewashing of the patients' rooms.

Do you mean rooms within the house?—No, the rooms from which they have been removed.

Have you done that to any considerable extent to them?—Yes, to a very considerable extent.

Can you furnish the Committee with any account of what has been the average weekly or monthly expenditure, during the period of this epidemic?—I think I can; the monthly housekeeper's account I calculate latterly to be of the amount of from fifty to sixty pounds a month, for butchers, bakers, and those expenses attached to it, which we class under the head of the Matron's Account: we have had a very different establishment of late to what we formerly had.

You mean as to the number of persons within the walls as patients?—Yes.

Does that include the article of washing?—That is done in the house; we have a laundry maid to whom we pay wages, and who boards in the house: our regular establishment of nurses is four, which we are obliged sometimes to increase one, two, or three, as we want assistance; but four is our regular establishment.

Has the expense been considerable for the last year, for bedding, sheets, and so forth?—Yes, for sheeting in particular.

What should you consider as the whole amount of your expenditure within the last year, from the 25th April 1817 to the 25th of April 1818?—I believe the

*Mr.
J. C. Matthews.*

Mr.
J. C. Matthews.

treasurer is more competent to answer that question than myself, because he has the whole of it under his superintendence: I have only a part of it.

Of an average year, when the number of patients is smaller, that is, to say, prior to three years of epidemic, what has been the monthly expenses?—For the matron's account, for the year 1814, £.129. 15s. 4d.; for the year 1815, £.135. 1s. 9d.; for the year 1816, £.160. 8s. 6d.; for the year 1817, £.510. 13s. 8d.

To what date does the last come up to?—To the 24th April.

As inspector, when you visit the houses from which a patient is removed, are you accustomed to leave any paper containing the rules of the Institution?—Invariably.

Is the paper, now lying before the Committee, similar to those you are in the habit of leaving?—It is.

[It was read, as follows:]

RULES of the Institution for the Cure and Prevention of Contagious Fever in the Metropolis, to be observed in the Apartments of those who are confined by infectious Fevers :

1st. It is of the utmost importance to the sick and their attendants, that there be a constant admission of fresh air into the room, and especially about the patient's bed. The door, or a window, should therefore be kept open both day and night, care being taken to prevent the wind from blowing directly on the patient.

2d. An attention to cleanliness is indispensable. The linen of the patient should be often changed, and the dirty clothes, &c. should be immediately put into fresh cold water, and afterwards well washed. The floor of the rooms should be cleansed every day with a mop; and all discharges from the patient should be immediately removed, and the utensils washed.

3d. Nurses and attendants should endeavour to avoid the patient's breath, and the vapours from the discharges; or, when that cannot be done, they should hold their breath for a short time: they should place themselves, if possible, on that side of the bed from which the current of air carries off the infectious vapours.

4th. Visitors should not come near to the sick, nor remain with them longer than is absolutely necessary; they should not swallow the spittle, but should clear the mouth and nostrils when they leave the room.

5th. No dependence should be placed on vinegar, camphor, or other supposed preventives, which, without attention to cleanliness, and admission of fresh air, are not only useless, but, by their strong smell, render it impossible to perceive when the room is filled with bad air or obnoxious vapours.

If these rules be strictly observed, an infectious fever will seldom if ever be communicated; but if they be neglected, especially where the patient is confined to a small room, scarcely one person in fifty who may be exposed to it, can resist the contagion; even infants at the breast do not escape it, though, providentially, less liable to be affected than adults.

Since infection originates in close, crowded, and dirty rooms, those who make a practice of admitting fresh air at some convenient time every day, and of frequently cleansing their apartments, bedding, furniture, &c. and washing the walls with quick-lime mixed with water in the room, may be assured they will preserve their families from malignant fevers, as well as from other diseases.

N.B.—The House of Recovery for the reception of patients labouring under typhus fever, is situated in Pancras-road, where applications for admission are to be made.

Do you find a disposition among the poor, as far as they are able, to comply with those regulations?—We find them perfectly willing, but there are some instances of difficulty with them, which requires some explanation; for instance, among the weavers in Spitalfields, a man has a loom in his room, and he sleeps in it with all his family, in which we have recommended whitewashing, that would of course stop his work; there was a difficulty in such a case; others again arise out of the number of Irish people living together, and we have a number of patients of that description, though the case of a refusal to have the apartment limewashed by them seldom occurs.

Mr.
J. C. Matthews.

In general you find that the objection arises from the circumstances or poverty of the parties, and not from any reluctance to comply with the rules?—No, not at all.

Do you find the Irish people live together more promiscuously, and in larger assemblies than the English?—Certainly.

So that you will have many families almost inhabiting the same small habitation?—Certainly.

In what part of the town do they principally inhabit?—In the neighbourhood of Saffron-hill, Gray's-inn Lane, Dyott-street St. Giles's, and also there are numbers of them at the east end of the town, at Whitechapel.

Are those quarters almost always affected by contagious diseases in the autumn?—Certainly more than other quarters.

Do you find in those quarters an unwillingness of the sick to be removed into your hospital?—No, we do not.

In general are they very thankful for the care and attention that they have received?—Yes; I have known a number of instances of that description: there is one instance of a husband who went out of the hospital himself a convalescent, crying; he having objected to his wife coming, the man thereby concluding that he had lost his wife.

What is the furthest limit from which you have taken patients in the metropolis and its neighbourhood?—As low as Stepney on the Whitechapel road, and below Shadwell. I would mention that there have been no limits set to the receiving of patients; we have received them from every part of the metropolis. I will mention one case that would exhaust our funds very much, which is this, formerly when we had to hire porters; we have one now stationary, and in the house; and the expense of removing patients last year amounted to sixty-five pounds, and which would have been nearly double, if we had not had an establishment of our own for the purpose.

Can you state to the Committee what the expense has been in whitewashing and fumigating the houses of the patients who have been removed into the infirmary?—Yes, I believe I can do that accurately; the whitewashing for the last year has been 48*l.* 15*s.*

How many apartments?—One hundred and fifty-one, I believe.

Has much of the fever appeared at such a distance from the Fever House as to make it a considerable inconvenience to send for the patients, and to indispose the patients themselves to go so far from their homes?—From the experience I have had, I should think not.

Richard Phillips, Esquire, again called in; and delivered the following Statement.

Monthly admission of Patients into the House of Recovery, since the Annual Report dated April 25, 1817.

Richard Phillips,
Esq.

In Typhus Fever:

April 25	-	-	-	to	-	-	-	May 30, 1817	-	-	-	41.
May 30	-	-	-	to	-	-	-	June 27	-	-	-	28.
June 27	-	-	-	to	-	-	-	July 25	-	-	-	20.
July 25	-	-	-	to	-	-	-	August 29	-	-	-	63.
August 29	-	-	-	to	-	-	-	October 31	-	-	-	108.
October 31	-	-	-	to	-	-	-	November 28	-	-	-	87.
November 28	-	-	-	to	-	-	-	December 26	-	-	-	68.
December 26	-	-	-	to	-	-	-	January 30, 1818	-	-	-	92.
January 30	-	-	-	to	-	-	-	February 27	-	-	-	68.
February 27	-	-	-	to	-	-	-	March 27	-	-	-	56.
March 27	-	-	-	to	-	-	-	April 24	-	-	-	52.

In Scarlet Fever - - - - - 20.

Jovis, 30^o die Aprilis, 1818.

The Honourable HENRY GREY BENNET, in the Chair.

Alexander Marcet, M. D. called in; and Examined.

*A. Marcet,
M. D.*

ARE you one of the physicians to Guy's Hospital?—I am.

Are you on the committee for managing the Fever Institution?—I am, and have been for many years.

Are you in the habit of visiting that institution?—I cannot say that I am in the habit of visiting it regularly, but I have occasionally visited it, with a particular object.

What was that object?—The object was, to ascertain, to the best of my judgment, conjointly with another member of the committee, Dr. Yelloly, the nature of the fever that prevailed, and the nature of the cases that were admitted into that institution.

What was the general character of the fever, and what the description of cases admitted?—The fever in general had a mild character; there were some severe cases, but the great majority were mild fevers, though abundantly well marked as fevers, and, in many instances, evidently of a contagious nature.

What was the description of cases that were admitted?—It appeared to us, upon going round and seeing, I believe, every one of the cases, that they were all of that description of fevers for which the House of Recovery was established, with the exception of a few cases of scarlet fever, which, however, now come within the laws of admission of the society.

Did you make that inquiry and examination in consequence of an opinion having gone forth, that persons were admitted into that institution who had not upon them the disease that it was instituted to cure?—We did; we were appointed a sub-committee for that especial purpose, and the result of our inquiries was, that although there was a considerable proportion of mild cases, yet all of them came within the general denomination of fever.

Is the fever at present in a state of abatement?—Judging from the state of the fever in the hospital to which I belong, the cases of which are better known to me than those in the Fever Institution, it has not suffered any material diminution from its original frequency, during the last two months; though there were strong indications of its abating during the month of February.

Is it not the character of the fever to decline as the summer approaches?—It generally does.

Is it not a fever which generally commences its ravages in autumn?—It commonly does; but I would beg leave to observe, that the prevalence of fever is often influenced by various accidental circumstances; so that this law is subject to frequent exceptions.

From the observations which you have been able to make, and from what you have professionally heard, is it not to be expected that where the disease has continued for some time, that though it may decline as the warm weather approaches, it will revive again in the autumn?—This, certainly, frequently happens.

In the last epidemics of 1801 and 1812, was not that the case?—To the best of my recollection, it was; but as I did not in 1801 belong to any public institution, I cannot speak as to that period from personal knowledge.

Is it not the character of that fever to linger a considerable time about places where it once originated?—It certainly appears very strongly to be so, from a series of reports of our institution, in which the same courts and alleys are continually infected with contagious fever.

Have you ever heard, that in jails, where a fever has originated, that though it may be abated for a time, it is several years before it is entirely worn out?—I have no experience of attendance in jails, but I have understood that to be often the case.

So that, supposing the evidence to be correct, which the numbers now in the institution seem to show, that the fever is less violent at present than in some preceding months, it may recur again in the autumn, with all the rigour that it had some short time back?—It is certainly not an improbable event.

How many persons have been admitted into Guy's Hospital, attacked by this fever, within the last twelvemonth?—A very considerable number, compared to the
the

the general number of admissions; and, so far as my knowledge of the hospital goes, quite unprecedented.

A. Marcet,
M. D.

Can you give to the Committee any account of the average number of admissions for fever, for some years past, into Guy's Hospital, to enable them to contrast it with the admission of patients last year?—The labour of examining the books of the hospital, during a considerable period, being very great, and the time allowed to me being small, I have been able only to carry on this inquiry for the last two years, so as to contrast the last twelvemonth with the twelve months preceding.

Was not that preceding year one in which the number of cases were unusually great, as compared with the preceding years?—Judging from our hospital, the numbers were not unusually great in that year. It might be somewhat greater than the average, but not considerably so.

Will you be so good as to state to the Committee the result of the examination of your books?—The result of that examination will appear by the following tabular statement, which I have divided into monthly reports.

[*It was delivered, and read as follows:*]

Cases of Fever admitted into Guy's Hospital.

	From May 1816 to April 1817, inclusive.		From May 1817 to April 1818, inclusive.		T O T A L S.
	Men.	Women.	Men.	Women.	
May - - -	1	0	3	2	From May 1816 to April 1817:
June - - -	6	3	4	3	
July - - -	1	2	5	5	Women - - - 19
August - -	2	2	8	5	<u>36</u>
September -	0	2	23	12	
October - -	0	1	14	8	From May 1817 to April 1818:
November -	0	2	13	5	Men - - - 132
December -	0	1	20	15	Women - - - 91
January - -	1	2	13	10	<u>223</u>
February - -	0	1	9	8	
March - - -	2	3	10	7	
April - - -	4	0	10	11	
	17	19	132	91	Guy's Hospital, 30th of April 1818.

A. M.

N. B.—In the above statements, which are taken from the admission books, the fevers occasionally arising in the house by contagion are not included. Of these no less than five have occurred amongst my own patients within the last six weeks, viz. three men, who caught fevers in the hospital while under treatment for various other disorders; one nurse, who died; and one female patient, who was convalescent of a surgical disorder, when she caught the fever in one of the wards, where she is now lying in a critical state.

It appears also, by a reference to the books in the steward's office (as will be seen by the annexed detailed statement,) that, besides the cases of fever above enumerated, there were, between May 1816 and April 1817 inclusive, fourteen cases of fever admitted into the hospital on by-days, on the ground of their being *bad fevers*; and that between May 1817 and April 1818 inclusive, there had been fifteen fevers admitted in the same manner.

This will alter the totals as follows :

26 MINUTES OF EVIDENCE BEFORE SELECT COMMITTEE

A. Marcet,
M. D.

In the year ending 30th of April 1817, In the year ending 30th of April 1818,

There were 36 admissions - - - 238
- - - 14 additional, on by-days - - - 15

Total - 50 253

Deaths - 13, or about 1 in 4 - - - 16, or about 1 in 15.

Average number of deaths in the two years, 29 in 288, or about 1 in 10.

Fever Patients at this moment in the House, (30th April 1818.)

Men - - - 14
Women - - - 12

Total - - - 26

STATEMENT referred to in the preceding Answer of Fever Cases admitted into Guy's Hospital on By-days, from May 1816 to April 1818, both inclusive.

W. K. Steward.

	1816—17.	1817—18.
May - - - -	0	0
June - - - -	1	1
July - - - -	3	0
August - - - -	1	1
September - - - -	2	1
October - - - -	1	2
November - - - -	0	1
December - - - -	3	1
January - - - -	0	3
February - - - -	1	2
March - - - -	1	0
April - - - -	1	3
Admitted - - - -	14	15

Died of fever this year, be- } 13 - - 16 { Died of fever this year, be-
tween May and April - }

What do you consider as the average number of patients that in common years are admitted monthly, for fever, in the hospital?—There are some months in which none are admitted. As, however, in the year preceding the epidemic, there were only 36 admissions, the average monthly number would only be three; and the year in question is perhaps not the most favourable for a small average, as it immediately preceded the epidemic.

Have you any separate fever-ward in Guy's Hospital?—We have not.

Are the patients suffering under an attack of fever mixed indiscriminately with patients who are suffering under other diseases?—They are, with the exceptoin of the venereal patients, who have separate apartments.

Do you think that arrangement a good one?—That is a difficult question, and which requires a little explanation; experience has certainly shown that fevers may be caught

caught in the wards. At the same time, I beg to state to the Committee, that the ventilation upon the whole is so good, that it very rarely occurs in our hospitals in ordinary times. I have seen this, however, as I have before stated, happen no less than five times in the course of six weeks; but I can partly account for it from some peculiar circumstances. There is in Guy's Hospital a school of medicine, and there are clinical lectures delivered; for the purpose of giving those lectures, patients are selected, and two small wards are appropriated to cases so selected; these wards contain only twelve patients each, whilst the other wards contain thirty-two each. Now it happened that of those five fevers, three originated in the course of three weeks in one of those small wards, showing in a very striking manner, the effect of diminished space in favouring contagion, for these wards are precisely situated in the same manner as the others, being merely separated by temporary partitions. I conceive that it would be a very good plan to have fever-wards in an hospital, provided they were built for that special purpose, and provided they had a police peculiar to themselves, otherwise the danger to the attendants and medical officers would be very materially increased.

Do you think then that it would be advisable to extend the Fever Institution of the committee of which you are a member, to embrace all the fever cases which are now contained in all the hospitals, supposing a place could be constructed in the Fever Institution to receive them?—It certainly would be a most desirable object; at the same time, those hospitals which have schools of medicine attached to them would no doubt wish to have a few cases of fever admitted, in order to give the students an opportunity of seeing the disease, but then they would be so few as not to endanger the safety of the hospital.

Supposing that the great mass of cases were removed from those hospitals, could not a small ward be found in each of those hospitals, which would be sufficiently large to contain cases for the purpose you mention, and where they could also be subjected to that peculiar mode of treatment which you term *police*, so as to prevent infection?—I conceive the idea of small wards to be incompatible with the intended purpose; there must be considerable space in order to remove all danger.

Supposing, for instance, one of those rooms in which the three cases of fever were generated, had been devoted solely to fever cases, should you have considered the size of that room to be sufficient?—Certainly not; for, in order to stop the contagion, I was obliged to break up the ward, and disperse the cases of fever I had in them throughout the house, when the mischief immediately stopped.

Is there not, in cases of epidemic, considerable danger, even in those large wards, by introducing a number of fever patients amongst other patients affected by other complaints, condensing thereby the contagion, so that all would run a chance of being infected by the disease; whereas it might be safe to mix only one or two cases of fever in the large wards?—Certainly; and that is the reason that prevents most hospitals in London from having fever-wards. It is necessary to dilute the contagion in order to render it harmless, and therefore they endeavour to avoid all such accumulation.

Do you not think, that though that argument is excellent in an average state of the disease, yet in cases of epidemic it would wholly fail?—Certainly, in cases of epidemic like the one that now prevails, the want of fever-wards or fever-houses, capable of containing all cases of fever, is very severely felt.

Taking, then, the choice of the least evil of the two, do you not think that more danger of spreading the complaint is created by mixing fever cases along with other patients, than good would be gained by admitting fevers into the hospital at all, for the purposes of giving instruction, in that species of complaint, to the students?—A very few occasional cases, merely as specimens of the disease, cannot be, in my opinion, attended with any danger to the hospitals, and the instruction of pupils is a very essential point.

Supposing there were one or more fever hospitals built in the neighbourhood of London, would there be any inconvenience for the pupils to attend them for instruction?—There certainly would, because the schools are a concentrated system of education, the lectures being given in a systematic and complete series; and it is a very material convenience to the pupils to receive that instruction on the spot: and besides, after attending the lectures in one place, they could hardly go for illustrations to another, at a distance from their respective institutions.

Please

A. Marcet,
M. D.

Please to tell the Committee whether, in your opinion, the wards containing contagious fever in Guy's Hospital can be sufficiently ventilated, without inconvenience to other cases?—The system of ventilation which belongs to a fever, and that which belongs to some other diseases, are in many instances absolutely incompatible.

What number of patients is Guy's Hospital calculated to hold, how many beds?—It holds 400, as near as possible.

What are the days of admission?—The regular admission takes place only once a week, on Wednesdays, at ten o'clock.

What number of patients are there in the hospital now?—It holds 400, and it has nearly that number constantly within its walls.

Are you ever obliged to refuse a patient for want of room?—Constantly, every week; on every admission-day, I should think that at least four or five times the number we receive are disappointed by being refused.

Is the hospital one whose doors are open to every one who applies, if there is room to hold them, or is it necessary to obtain an order from any subscriber?—It is an hospital where no form of recommendation is ever used or required. The instruction which the physician receives when he enters upon his office is, to admit, to the best of his judgment, the most severe cases; and the patients have only to walk in and show themselves.

Is it supported by voluntary subscriptions, or by estates?—It is the peculiar advantage of this hospital to be supported solely by estates, being chiefly donations of the founder, Thomas Guy.

Have any of the students of the hospital suffered from this fever, or any of the medical attendants?—There has been an uncommon mortality among the students, both at Guy's and St. Thomas's Hospital: I have heard of thirteen or fourteen students in the course of the last twelve months: but I do not understand that they all died of fever, though a considerable proportion of them died of that disease. A few of the nurses have also suffered from the fever.

Of what description of classes do the greater proportion appear to suffer from fever?—Fevers most frequently occur amongst the poor; but it is my belief, that fevers are more fatal in the higher classes than in the lower.

You have stated the number of patients admitted into Guy's Hospital under the fever; can you inform the Committee as to the mortality?—I can, as to the two years, the account of which I have laid before the Committee: the result was such as to surprise me; I mean in reference to the difference of the comparative mortality in the one year with the other: in this last year, in which we had 258 cases of fever, the mortality was only sixteen, being a proportion of one to fourteen or fifteen; in the former year, in which we admitted only fifty fevers, the deaths were thirteen, which was a little more than one in four; combining the two years, the average mortality appears to have been a little more than one in ten; and this gives rise to a very important remark, which has also been made at the Fever Institution, namely, that in the years of epidemic the fatality of fever is much less than in those in which such epidemic does not prevail.

Have you, in point of fact, rejected at Guy's Hospital any fever cases?—It is the rule at Guy's Hospital, to admit fevers in preference to other cases, from a motive of humanity, to prevent their being carried back to the courts and crowded dwellings, where they commonly originate, and probably spread the contagion very fast; but it has happened once during this epidemic, that one case of fever was actually rejected for want of a bed to receive it; but this is a very unusual circumstance.

Do you admit fevers on by-days, as considering them cases of urgency, treating them as accidents?—We do, when we have beds for them; but it is impossible to answer for spare beds, as a certain number of them must always be kept for accidents.

You always keep some beds for accidents?—We always keep about twelve on each admission-day, which are gradually occupied during the week.

Then you have not rejected more than one case of fever?—No, not to my knowledge.

In that instance, for want of accommodation?—Yes; but I would beg to observe as a general remark, applying to the whole of my evidence respecting Guy's Hospital, that I have spoken from my own knowledge and belief, without consulting with my colleagues upon the subject of the hospital documents, from which I have obtained my results;

results ; these probably might be found, if examined with a very critical eye, to require correction in a few instances, because different physicians are apt to use different terms, and because one is not always able to say with accuracy, on admitting a patient, what his complaint will ultimately turn out to be ; and the characters of fevers in particular, are not always sufficiently marked from the beginning, to enable the physician to ascertain their precise nature, so that it may happen that a mere symptomatic fever may occasionally be mistaken for a fever of the idiopathic kind, or *vice versa* : this source of error, however, is not likely to occur frequently, or to vitiate the results materially, especially as it applies to one year as well as the other, and therefore cannot affect the accuracy of the comparative statements.

A. Marcet,
M. D.

John Yelloly, M. D. called in ; and Examined.

TO what hospital are you physician ?—The London Hospital.

J. Yelloly,
M. D.

Are you also one of the committee of the Fever Institution ?—I am ; and have been so for many years, nearly from its establishment.

Without troubling you to answer the same questions which have been proposed to Dr. Marcet, as you have heard them, do you concur in the statement which he has given concerning that institution ?—Yes, I do ; I was one of a committee associated with him for the purpose of examining some points of management, and the opinion he has given is the same which I have formed. I should beg more particularly to state, that it was referred to the medical committee of the institution of which we are members, to examine into some particular objects connected with the charity. That committee made a report, which, if the Committee think it desirable, is at their service, though Dr. Marcet has stated the principal result of our investigation.

Have you had a great number of fever cases in the London Hospital during the last twelve months ?—Yes, we have.

Are you enabled to furnish the Committee with an account of the number, as well as with an account of the number of admissions in preceding years ?—I can give the Committee information to a certain extent ; I examined the records of the hospital with as much attention as the nature of the subject and the shortness of time afforded me would allow ; and from them I have made out an account of admissions in fever since the year 1812 inclusive, up to the present time. For the first five years, the average number of admissions was 30 in each year. The number admitted in 1812 was 40 ; in 1813, 19 ; in 1814, 27 ; in 1815, 38 ; in 1816, 26. In the year 1817, there were 97 cases of fever admitted ; and in the first three months of this year, there have been 35 cases admitted. In the month of January, there were 13 cases ; in the month of February, 14 ; in the month of March, 8 ; making 35 in the whole.

Can you state to the Committee the mortality in those years ?—The average mortality, as far as I could collect it, may be stated as follows ; but I may observe to the Committee, that there is a very considerable difficulty in making out a correct statement when there is a great number of books and names to examine, though I should suppose the account may be considered upon the whole as tolerably correct. In the first five years of the series mentioned, the average deaths in fever were about one in five. In the year 1817, the whole number of deaths in fever, (the admissions being 97,) were 13, which is about one in seven and a half. In 1818, that is, in the first three months of 1818, there were 35 admissions and two deaths, which is a mortality of one in seventeen and a half. I should beg to state to the Committee, that as the hospital invariably admits the worst cases, it happens that some of those deaths are of patients admitted under circumstances perfectly hopeless ; and also, that in some instances, when patients have recovered from fever, they have, after a lapse of two or three months, died of consumption, or some other complaint. In the number of 13 deaths which occurred during the last year, one took place in the hall, before the patient was taken up to bed ; two on the first, and one on the second day after admission. I think it right to mention this, because it would appear in those instances that the cases were quite hopeless.

What are your days of admission at the London Hospital ?—We admit patients once a week, on the Tuesday.

Do you admit cases of fever as urgent cases, whenever they are presented at the hospital, and you have room to receive them ?—Not invariably. There is a

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regulation in the hospital against the admission of contagious diseases; but I believe, as far as fever goes, that this is a law not usually acted upon. I have known instances, however, in which the Committee have expressed disapprobation at fever cases being admitted on by-days, considering that the admission of such cases does not accord with the rules of the hospital.

Do you admit patients upon their knocking at the door, or is it necessary to have a certificate of recommendation?—All accidents and cases of extreme urgency are admitted without any form of introduction, on whatever day they may apply; but recommendations from governors are necessary for the admission of other cases. But though it may happen that in the vicinity of the hospital, there is sometimes a difficulty of getting admission tickets, because the governors who reside near it are very much in the habit of exercising their privilege of recommendation; yet as the whole number of governors is very large, the difficulty can never be so great as to preclude a patient from having the usual chance of admission. On by-days the physicians and surgeons may admit, when there is room, such urgent cases as come with recommendations, and cannot without danger be postponed to the regular taking-in day.

Is the hospital supported by its own funds, or by voluntary contributions?—The principal part of the expenses is defrayed by property belonging to the hospital; and it is therefore dependent upon voluntary contributions in a small degree only. The independent property amounts to about 7,000*l.* a year, and an extra 1,000*l.* at the least are reckoned upon, and invariably received, at the anniversary meeting. The hospital was formerly in embarrassed circumstances; but the large sums of money which have been raised by the liberality of the public, and which amounted on one occasion to about 24,000*l.* and on another to about 20,000*l.* have been almost sufficient to raise it to a state of independence.

How many patients do you think the hospital will contain?—About 250.

Have you any fever-wards attached to the institution?—We have not.

In cases of fever do you mix them with other patients?—We do.

Have any instances occurred in that hospital of patients who have had other diseases, catching the fever from other patients who have been received with fever?—I do not recollect any instance till last year, when a patient of my own, who did some friendly offices for a patient who was dangerously ill of fever in the same ward, caught the disease, though the attack was but of a slight description.

Is it your opinion, that it would be advisable to form an establishment to receive fevers generally throughout the metropolis, or to allow of the practice at present existing, namely, of mixing them with other patients?—I should think an establishment which was sufficient to receive all the fever cases very desirable.

Do you think that, supposing all those fever cases were put together, it would not be the means of establishing a species of school for the treatment of fever which would be very beneficial to medical science?—I should think, for the reasons which Dr. Marcet has stated, that it would be very inconvenient to have such a school at a distance from those hospitals where medical education is generally carried on; but I conceive it would be advantageous to the profession and the public, that there should be an opportunity of studying that species of disease as accurately as possible; though I must observe, at the same time, that according to the present plan, there is a very ample opportunity afforded for becoming acquainted with fevers. It is possible that the present plan may be full as beneficial as any that could be recommended for the improvement of the practitioner, or the study of the disease; because in every hospital a physician has frequently fever patients under his care, by which means his attention is more directed to the subject of fever than could be the case if fever cases were not received into such establishments. The hospital is so well ventilated, that, as I have observed, no instance of the propagation of fever in the house has come within my observation till last year; but this year, and in the latter part of last year, several cases of fever occurred, both among the nurses and the porters, some of them very severe, and some fatal. There was a remarkable instance in a very valuable officer of the hospital, the apothecary, who took a fever, and had a very severe and dangerous attack. He recovered from the fever with difficulty, but was carried off some weeks afterwards by consumption.

For the interests of the London Hospital, the Committee would ask, whether that building is not capable of taking in a greater number of patients, if the income of the hospital was larger?—I should think that it is. There might, I should

imagine, at no great expense, be wards made in the upper part of the house, which would allow of an additional number of patients being admitted.

Did it not some years ago accommodate more patients than it does now?—I believe never. I have been physician to it more than ten years; and at my appointment the number contained in it was under 200, and then it was beginning to emerge from its difficulties, by the first liberal subscription, which I have noticed above. I understand the number which I have stated to the Committee, to be the greatest amount which the hospital has ever accommodated.

The Committee understand you to say, that the ventilation of the wards is as complete as you wish it to be?—I believe no hospital is better ventilated, or has larger and more airy wards.

Has no inconvenience been found to other patients from that ventilation?—I believe inconvenience is frequently found from patients labouring under different complaints being exposed to the same temperature; and it appears to me, that the degree of ventilation generally proper in fever, is not, for example, well adapted for complaints in the chest, instances of which are very common in hospitals.

The venereal cases you keep by themselves?—We have no venereal wards; but it is quite impossible for venereal cases to be excluded, although the admission of such cases is discouraged. I would beg to state, that I should conceive it perfectly impossible by any plan, to prevent entirely the admission of fever cases into an hospital, because it would happen, that as complaints are sometimes not very well marked at their commencement, they might thus be introduced, and when once admitted, humanity would prevent their being removed.

But in all cases of confirmed fever, do you not think that it would be advisable to send them to a place peculiarly adapted by its construction to accommodate them?—I should think it would be desirable to do so; but I can scarce imagine, that any case would be actually sent out of an hospital to be forwarded to any other medical establishment. I have mentioned, that the committee for the management of the hospital, are adverse to the admission of fever cases generally; and I would add, that I have occasionally advised the friends to take patients to the House of Recovery.

Have the goodness to inform the Committee, what precautions are taken upon the admission of a patient ill of a contagious fever, to prevent the communication of that disease through the medium of that patient's clothes?—I cannot accurately state the steps of the plan. With regard to clothes, I believe if the clothes are very bad they are destroyed, and the patient is supplied by the hospital, or by the Samaritan Society, which is attached to the hospital, with other clothes; and the clothes which are good are cleansed or fumigated.

The Committee think you have stated, that in those cases in the hospital in which the contagion spread, the persons receiving it were not patients, but attendants upon the hospital?—As far as my own personal observation goes, I recollect only one instance of a patient taking fever; but I have known several instances, as I have already stated, in which the attendants have caught that disease.

Does it not appear as a matter of fact, that patients afflicted with certain disorders of a particular kind, are less susceptible of contagious diseases than those who are not afflicted with any disorder whatever?—I think, upon the whole, that they are.

When patients are brought to the hospital, how do they generally come?—Those who are able to walk, or have not money to defray the expense of a coach, walk; and many are brought by their friends in coaches.

Do you receive persons ill of contagious fever, when brought in a coach?—We do not inquire how they come; we know nothing of the patients till we see them.

Do you conceive bringing patients of that description in a coach, is not liable to produce an increase of the contagion?—I think that when fever is at its commencement, it is not usually capable of being communicated by contagion; but when that complaint is at a more advanced stage, it is generally susceptible of being so propagated; and I have known several instances of persons brought in coaches, where I should have thought it unsafe to succeed them.

Are patients who are convalescents [more liable to take disorders, than those who are ill of any other disease?—I have already mentioned that I recollect only one instance of a patient, in the London Hospital, having taken fever from another patient ill of that disease.

Do you happen to know whether there is a regulation in the Fever Institution, forbidding

*J. Yelloly,
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forbidding the reception of any patient brought in a hackney coach?—I do not know of any such regulation; but the institution is in the habit of sending a kind of chair for patients; and when I have ordered my patients into the House of Recovery, I have always desired that this chair might be sent for them.

Do you know whether contagious fever is generated in any of the poor-houses in the metropolis?—I know that in the workhouse of Shadwell, for several years past, patients with fevers have at various times been sent to the London Hospital, and to the House of Recovery. I was requested in the month of October last, to inspect the Whitechapel workhouse with my two colleagues, the other physicians to the London Hospital, in order to examine into the state of it, and to give our opinion as to the best mode by which fever was to be prevented in it. We made a report to the trustees on the subject. It contained about 600 persons. We found that cases of fever had occurred to a greater or less extent for a very long time, but more especially from the month of February preceding our visit; that they had appeared in every part of the house, but particularly the basement wards; that fever was frequently introduced by new-comers, and that those long resident in the house were frequently the subjects of it, as well as the persons lately admitted; that almost all the children in the house had had fever at one time or other; that few of the nurses had escaped the disease, and that some of the adults, but many of the children, had been attacked with it two, three, or even more times. The advice which we gave under those circumstances was, to do away entirely with the occupation of the basement floor, which was very ill ventilated and damp; to diminish the number of inmates to what the workhouse could with propriety contain, by taking temporary houses in the neighbourhood; to make an effectual separation of well marked fever cases, and of doubtful and convalescent cases; to make the ventilation more complete throughout the house, and adopt a regular system of cleansing and lime-washing at all times, and of fumigation, till the tendency to fever should disappear. I have not yet heard what changes have been made, in consequence of our representation.

You mentioned that there was a society attached to the London Hospital, that bears the name of the Samaritan Society, what are its objects?—The objects of the Samaritan Society are to supply with clothes such patients as may be admitted into the hospital, and are badly provided with them; likewise to furnish trusses to such patients as require them, and to provide some accommodations which the rules of the hospital do not allow. The society likewise supplies those patients who have not the means of returning to their friends, with money to pay their expenses home, and gives them occasionally a little money to assist in supporting them until they are able to follow their usual occupations.

Peter Mark Roget, M. D. called in; and Examined.

*P. M. Roget,
M. D.*

WERE you physician to the Fever Institution at Manchester?—I was.

How long ago is it since that establishment was instituted?—It was instituted in the year 1796.

How long had it been established before you were physician?—I was physician to that institution from 1804 to 1808.

Was this establishment owing to any particular increase of fever at the time to which you allude?—I understand there was a peculiar increase of fever previous to the year 1796.

Was it part of the plan to concentrate all the fever cases of that town and its vicinity within the walls of that institution, and to remove them out of the other hospitals?—That was the plan.

Has any inconvenience arisen from concentrating together all the cases?—I believe none whatever; I believe no instance has occurred of infection being communicated from that hospital to any person.

Can you furnish the Committee with an account of the number of patients that it has received for any certain number of years?—I have drawn up a table to that effect, containing an account up to the period of my leaving Manchester, that is, from the year 1796 to the year 1808, which I will deliver in to the Committee.

[It was delivered in, and read, as follows:]

TABLE exhibiting the number of patients admitted in the House of Recovery in Manchester since its opening in 1796, to 1808; with the numbers of cures and deaths for each year.

P. M. Roget,
M. D.

YEARS.	The Number of Patients,				Proportion of Deaths to Admissions.
	Admitted.	Cured.	Dead.	Remaining at the end of each year.	
From 1796 to 1797 -	371	324	40	7	1 in 9
1797 - 1798 -	339	300	16	23	- - 20
1798 - 1799 -	398	360	27	11	- - 14
1799 - 1800 -	364	315	41	8	- - 9
1800 - 1801 -	747	645	63	39	- - 11
1801 - 1802 -	1,070	956	84	30	- - 12
1802 - 1803 -	601	539	53	9	- - 11
1803 - 1804 -	256	215	33	8	- - 7 $\frac{1}{2}$
1804 - 1805 -	184	144	34	6	- - 5 $\frac{1}{4}$
1805 - 1806 -	268	235	29	4	- - 9
1806 - 1807 -	307	258	33	20	- - 9 $\frac{1}{2}$
1807 - 1808 -	188	191	15	2	- - 12 $\frac{1}{2}$
Total from 1796 } to 1808 - - }	5,093	4,482	468	- - -	1 in 11

Has no officer of the establishment been affected from the contagion of fever during that time?—Not at all, at any time.

Do you consider that circumstance to have originated from the system of ventilation and fumigation therein established, which according to your opinion has prevented the contagion from being communicated?—I should think it owing partly to that cause, and partly to the great space which the wards of the building contain.

Can you state to the Committee what is the extent of the space to each ward, and the number of beds contained therein?—I cannot from memory.

In point of fact, is that space more considerable than in the ordinary wards of Hospitals with which you are acquainted in London?—From recollection I think it is; but I can only speak vaguely to that point.

From what you have heard of that institution since you have quitted it, can you inform the Committee whether it continues at present to answer the purposes of its establishment, as fully as it did during the time you attended there?—I understand it does perfectly.

Do you know whether there has been any great influx of fever cases within the last twelve months?—I am not able to answer that question, not having sufficient information upon that point.

Were fevers very prevalent in Manchester, prior to the establishment of this institution?—Fevers were very prevalent at Manchester prior to its establishment, and the contagion, at all times prior to the establishment of that institution, was constantly kept up. It appears from the reports, that during the eight winter months, from September to May, that is from September 1793 to May 1794, there were 400 patients in one street only ill with fever, on the books of the infirmary.

At where?—At Manchester. In a similar period, from 1794 to 1795, there were 389; from 1795 to 1796, 267; from 1796 to 1797, only 25; this was immediately after the establishment of the House of Recovery, and the numbers from that period have been very small.

P. M. Roget,
M. D.

To what cause do you attribute this diminution?—I should attribute it principally to the establishment of the House of Recovery.

The Committee understand, by means of the establishment of a House of Recovery, you took the diseased person out of his own dwelling, in which he spread the contagion all around him, and removed him into the hospital, and thereby the contagion ceased?—Certainly. What I have stated with regard to the number of patients as confined to one street, I would wish to be understood as comprising a few short streets in the immediate vicinity of that street; the street I mean is called Portland-street.

Was that street one of the most populous in Manchester?—It was very populous; I can hardly say the most populous in Manchester.

Is the House of Recovery in Manchester, an insulated building?—Yes, it is an insulated building.

Has it any advantage over other hospitals in Manchester?—It is completely insulated; and the premises are surrounded with a wall, and there are no houses adjoining to it; it does not stand particularly high; its situation is at about 100 yards from that very street that I have mentioned, namely, Portland-street.

Were other parts of the town affected by the disease, at the periods you have mentioned?—A great many other parts of it.

But the numbers you have given in, with reference to the winter months, were taken from that one street?—Yes, from that one street only, and a few small streets immediately connected with it.

Do you understand that the number of fevers in Manchester have diminished to a less degree than the ordinary average prior to the establishment of that institution?—I understand that is the case.

Did you find any prejudice on the part of the poor against being admitted into the house?—Not at the period when I was in Manchester; but there had been previously a great opposition made to the establishment of the institution, which opposition and which prejudices are entirely removed.

It seems then to be the opinion of the poorer classes of society, as well as those who entertained prejudices anterior to its establishment, that it has produced all the good which was expected?—It seems to have been the general impression that it has. Occasionally there have been no patients in the house for a period of a week or ten days.

What number is it calculated to hold?—One hundred, besides two small wards for scarlet fever.

Supported by voluntary contributions?—Entirely.

Do you know what is its annual income?—There are statements in the reports before the Committee which will furnish information on that point; it will be found that the expenditure varies very considerably. In the year 1806 it was £.2,089, and in the year 1809 it was £.1,191.

Is this institution connected with the infirmary?—No otherwise than that the medical officers of both institutions are the same, and the medical officers of the infirmary are empowered to admit any patients they may find ill of fever into the House of Recovery; and it sometimes happens that patients are transferred by them from the general hospital, when found to be affected with fever, into the House of Recovery.

It is stated in the reports that the average annual expense of parish coffins was considerably diminished since the establishment of the Fever Institution at Manchester?—It does appear in the reports of the Board of Health, which I have in my hand, that “the benefits of the House of Recovery at Manchester have been felt even in the common yearly expenses of the town, which, in the article of coffins alone, it has reduced on an average, from £.157. 8s. 3d. to £.105. 19s. 6d. while it has at the same time annually lessened the number of home patients of the infirmary, in the proportion of 1,697 to 2,880.”—*Proceedings of the Board of Health in Manchester, page 210.*

James Laird, M. D. called in; and Examined.

*J. Laird,
M. D.*

ARE you one of the physicians to one of the dispensaries in London?—I have been physician to the Carey-street or Public Dispensary for more than eleven years; I am also the assistant physician to Guy's Hospital.

What are the objects of the dispensary?—To give advice and medicines to such persons as are able to attend at the Dispensary; advice both medical and surgical; and to visit at their own houses the poor who are prevented by sickness from attending at the Dispensary.

Are the expenses of that establishment supported by voluntary contribution?—Entirely; the funds consisting in annual subscriptions, and in the donations, and legacies of governors, and other benevolent people.

It being a part of your duty to visit the habitations of the poor, have you found them afflicted with contagious fever?—At different times, during the eleven years; but more especially during the last twelve months.

Can you furnish the Committee with an account of the number of cases that have come within your knowledge for the last twelve months, and for preceding years?—There is another physician besides myself attached to the Dispensary. All the different cases which occur are entered in a book which is kept for that purpose; I have looked over that book, and I find an increase of patients for fever in the following ratio: In 1815, 84 were admitted; but in many of those cases we could not trace contagion, they were generally mild. In 1816, there were 76 cases of continued fever, which were also for the most part of a mild character; in some cases, a contagious character certainly did appear. In 1817, there have been 147 cases of fever at the Dispensary, the greater number of these have been from the month of June to the close of the year. And in 1818, to the 27th of April, we have admitted 59 cases of continued fever.

You mean by admitted, that you put them upon the books and attend them at their respective houses?—Yes.

In those last twelve months, has the disease partaken more of a contagious character than in the preceding years?—In the greater number of the cases the fever has shown a contagious quality.

Has it partaken in any degree of a malignant character?—The most severe cases have been generally removed to the House of Recovery, it having been our object whenever a fever manifested itself in our district to send the patients to the House of Recovery, when consent was given.

Have you found any prejudice necessary to be removed from the minds of the poor, before you can get them to consent to go to the House of Recovery?—Not to the House of Recovery more than to any other public establishment.

You mean that there is always a prejudice to be removed from their minds?—Not always: they are in many instances very thankful to be removed there.

From your observations, are you satisfied that the establishment of that House of Recovery has contributed to check the spreading of contagious fever?—I believe it has very much contributed. When we have been able to remove patients into the House of Recovery, there has been a better opportunity for the ventilation of the apartments of the sick, and other proceedings necessary for the checking of contagious disease.

Within the district of your Dispensary, are there not many parts of it in which contagious fever almost always exists?—There have been many months in which the number of applicants to the Dispensary under continued fever has been very limited: thus, in the month of February 1817, it appears from the physician's book of entry, that only one case of continued fever occurred out of 290 applicants; while in the month of September 1817, there were 28 cases of continued fever out of 218 patients.

Should you think that the fever is now on the decline, and less virulent, than in the autumn of last year?—General experience is in favour of the diminution of fever in winter, and of its being most prevalent in autumn; which appears by the following statement:

J. Laird,
M. D.

				Number of Cases.		
				1817:	1816:	1815:
July	-	-	-	17	9	13
August	-	-	-	15	11	13
September	-	-	-	28	7	11
October	-	-	-	25	5	13
				85	32	50
May	-	-	-	5	10	9
June	-	-	-	11	7	6
November	-	-	-	19	6	5
December	-	-	-	12	3	2
				47	26	22
January	-	-	-	9	4	5
February	-	-	-	1	3	2
March	-	-	-	3	4	2
April	-	-	-	2	7	3
				15	18	12

Should you apprehend that the fever, which is now following the ordinary course, and seems to be abating, would revive with much vigour in the autumn?—It is probable, from previous experience, that this may be the case; but I conceive that no definite opinion can be given upon that point.

Is it not commonly found, that a contagious fever having once broken out, lingers some years to the spots where it first originated, and is constantly in a state of revival?—There are many instances where fevers appear to prevail in particular districts of large towns, for a considerable period of time. I would beg to add, with respect to the probability of fever arising next autumn, that we have, even during the present month, sent several cases from our district to the House of Recovery; and, in reference to that institution, to state a memorandum made by the committee for the management of the public Dispensary, and printed in their annual reports, which is as follows:

“ The committee remark, with peculiar satisfaction, that contagious fevers, formerly very prevalent at all seasons, have nearly ceased to exist within the precincts of this institution. This circumstance is probably to be attributed, in a great degree, to the measures adopted by the Fever Institution in Pancras Road, originally recommended by this charity; by which many of the sources and receptacles of contagion have been purified.” This was published previously to the present epidemic.

Do you consider that the practice adopted by the Fever Institution, not only the moving of patients from their families, and thereby diminishing the spreading of the contagion, but by whitewashing and purifying the apartments, has contributed most essentially to that great object?—I certainly think whitewashing, and other means, are likely to check contagious fever; and those measures cannot be taken until the sick poor are removed from their apartments. I have seen, during the present epidemic, in one court, Castle Court, Fullwood’s Rents, in Holborn, three patients in one apartment, lying in three separate beds, sick of continued fever, and that fever, to the best of my belief, of a contagious character. At a subsequent visit to the same room, I saw four patients; the two elder ones, those who had been formerly ill, were now the subject of relapse of fever; and two new cases had occurred in the same family. I urged again the necessity of removal to the House of Recovery, my former recommendation not having been attended to, in consequence of the wife being desirous that her husband, who was apparently near dying, should not be removed

moved from home: I believe that these four poor persons were then immediately removed to the House of Recovery. With respect to the number of cases which have occurred, I beg to deliver in to the Committee the following statement:

J. Laird,
M. D.

	1815.	1816.	1817.	1818.
January - - - -	5	4	9	19
February - - - -	2	3	1	10
March - - - -	2	4	3	19
April - - - -	3	7	2	11 { April 27
May - - - -	9	10	5	
June - - - -	6	7	11	59
July - - - -	13	9	17	
August - - - -	13	11	15	
September - - - -	11	7	28	
October - - - -	13	5	25	
November - - - -	5	6	19	
December - - - -	2	3	12	
	84	76	147	

Few of these cases were decidedly of a contagious character.

Many of these cases occurred in succession in the same family, and were of a highly contagious nature.

This statement further shows, that in the winter months of this year, the contagion has been greater than upon other occasions in the metropolis, that is, in our district; which extends from St. Paul's in the east, to St. Martin's-lane westward, and from the river, our southern boundary, to Great Russell-street and Guildford-street to the north.

What is the number of patients that the charity has relieved within the last few years?—The number has varied, as is shown in our last published report.

State of the Charity, 1st January 1817.

Total number of patients admitted from 1783 (the date of its institution) 80,172. Of these, 20,805 have been visited at their own houses.

The applications for relief have for some time past increased every year, as will appear from the following statement.

In 1811	-	-	-	2,904.
In 1812	-	-	-	3,008.
In 1813	-	-	-	3,337.
In 1814	-	-	-	3,400.
In 1815	-	-	-	3,424.
In 1816	-	-	-	3,571.

From what you have professionally seen and heard, setting aside the epidemic, are the cases of fever greatly diminished from the metropolis?—Previously to the present epidemic, the fever occurred in isolated parts of the district, and did not

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*J. Laird,
M. D.*

appear to spread to any extent ; for the last year many persons have been taken ill of the fever in succession, in the same apartment, and in various parts of our district.

Should you not think, that generally speaking, whether arising from the establishment of this institution, or from a better system of ventilating the apartments, or from more cleanly habits being introduced, or from a different species of clothing being worn, woollens being less used, and other causes which might be specified, contagious fever is not known to the same extent in the metropolis, as it was known twenty years ago?—My experience in the metropolis does not extend much beyond the last twelve years, beginning after the close of a considerable epidemic, and extending to the present. During the interval, fever has not been common in the metropolis: but the causes which regulate epidemics are not known with certainty.

Do you know whether the epidemics of which you speak, were the consequence of scarcity of provisions, which had been before?—It has been referred to, as one of the principal causes of the epidemic occurring in the year 1801 and 1802, after the scarce year of 1799 and 1800. It will be remembered, that in 1799 there was a very wet summer, and the harvest was bad.

As a doctor of medicine, is it your opinion that an epidemic may be expected, as the almost certain consequence of scarcity and dearness of provision, lasting the common time that such scarcities have been observed to last, when arising from deficient produce in a bad season?—It has, I believe, generally happened that contagious fever has followed years of scarcity, and amongst the patients labouring under contagious fever last year, many were under circumstances of peculiar distress.

That is the result of your own observation?—Yes, of my own observation.

Is it your opinion that sufficiency of bad provisions is more likely to be the cause of contagious fever, than a deficiency of good, to those who live upon them?—I should conceive that a sufficiency of damaged food, or a deficiency of good food, would both be attended with a deficient supply of nourishment, and that both might act as causes of fever.

The one more than the other?—I cannot speak from any direct observation.

George Gilbert Currey, M. D. called in ; and Examined.

*G. G. Currey,
M. D.*

ARE you physician to St. Thomas's Hospital?—Yes.

Can you furnish the Committee with an account of the number of contagious fever that you have had in your hospital for the last twelve months, and for the two preceding years?—I cannot at this moment, because I only received the notice to attend here last night, and it has not been in my power to make out such a list.

Has the number, according to your recollection, considerably increased within the last twelve months?—Considerably more.

How many patients is your hospital calculated to hold?—It holds about four hundred and fifty, I should think, now ; there has been some addition made lately ; it will hold about four hundred and fifty.

What are your days of admission for patients?—Every Thursday morning.

Do you admit fever cases at any time when they are presented at your doors, or only on Thursdays?—They are admitted, if they come with any thing like a recommendation, on other days ; but it is optional with the treasurer, or steward in his absence, to receive them.

Is it an hospital which is open to every one who comes to the doors, or is it necessary to have a recommendation from one of the subscribers?—It is not necessary, if the cases are considered proper by the physician ; whether the order has a signature or not, is not material.

In point of fact, have you refused, either from want of room or other causes, any fever patients within the last twelve months?—Certainly not.

When they are received in the hospital, where are they put?—Generally, throughout the hospital, in different wards.

Have you no fever wards attached to the hospital?—None.

Has it ever happened that the disease has either been given to the nurses in the hospital, or to the medical attendants, or to patients, who were in there for other diseases?

diseases?—Never, to any of the medical attendants; occasionally it has spread to the nurses, but very rarely; occasionally it has appeared to be communicated to another patient, but it is very rare.

Is it your opinion that when patients, having diseases of different character and description, are mixed all together, that you have it in your power to adopt such a system of ventilation as is necessary to prevent the contagion of fever, without injuring the other patients that are in the hospital previous?—Perhaps not quite; I should think the ventilation necessary; for some patients might, in some instances, be prejudicial to other patients; for instance, to chronic complaints I should think it would.

Should you think that it would be advisable, if it were possible, to send all fever cases to a hospital similar to that known by the name of the House of Recovery, where fevers are treated solely, than to treat them as at present, when they are mingled with other patients throughout the hospital?—I am not acquainted with the House of Recovery; but I should strongly object for all the patients that we receive, to place the whole of them in one or two wards, because I should think the medical and other attendants more liable to infection than now.

Should you say, that if those wards were fitted up to receive fever cases, and managed by a police peculiarly adapted to fever cases, that would occur?—No doubt the objection would be greatly removed by that regulation.

Should you not think that the danger would be almost entirely diminished?—Experience has been adverse to that: where fevers have been placed in a particular part of the hospital, experience has certainly been against the practice; the disease spreading more than it does now.

According to your knowledge, do you think that the arrangement provided for fever patients is such as is calculated to prevent the spreading of contagion?—Yes, I believe so; that precaution is used which is usually esteemed necessary.

Are you aware that the experiment has been tried to a very considerable extent in Manchester?—No, I am not.

Have you lost in your hospital any nurses or sisters?—This winter we have.

From the disease generated in the hospital?—One sister, from fever in her ward, early in the winter; she died: the disease did not spread, but since Christmas one other sister, who attended upon her, caught it from her decidedly.

Did those sisters die?—Yes, both of them.

Was that the extent of the number?—There were four others, a sister and three other nurses, who appeared to catch it from them, who recovered.

When patients come to you with a fever upon them, do you know how they are brought, by coach or sedan chair, or by what conveyance?—No, I do not.

You do not inquire what way they come; you find them there, and treat them according to their disease?—We do not inquire about it.

Is this epidemic in a state of diminution?—On the decline, as far as I can judge from the number of patients that we have had in the hospital; it has not been of a more malignant character than a low fever generally is.

Has your mortality been greater this year than the preceding year?—I think it has been more.

Do you think more in the ratio of the admittances than in a preceding year?—Agreeable to the preceding answer, I should say yes, because our hospital is always full; therefore the annual number will always turn out nearly the same, for there are numbers every Thursday sent away.

Have you ever been obliged to send away patients with those contagious fevers upon them?—No, we select them in preference to any others; we have the liberty of marking them, and they are always received; we (the physicians) give such a mark, and they are always received.

When a fever patient arrives, what is done with him?—He is carried to a bed in a ward.

What becomes of his clothes?—I do not know.

You do not know whether they bake them, or fumigate them?—I do not know, that rests with the other branches of the establishment.

If an individual is in great poverty, does the hospital furnish them with clothes?—Yes, sometimes; the Lord Mayor's patients are sometimes clothed, but not always.

Have you any institution of the nature of the Samaritan Institution, attached to the London Hospital?—No.

You have stated, that the mortality was greater; do you mean by that, the proportion

G. G. Currey,
M. D.

portion of deaths to the number of admissions is greater?—The number received into the hospital during the year, is nearly the same; it does not vary much; consequently the mortality being greater, it follows, that the deaths must bear a greater proportion to the whole.

You have told the Committee, that the mortality has been very heavy this year; has that mortality been greater this year than the ordinary mortality in the number of fever cases that have been admitted into the hospital?—I cannot speak to that, if you confine it to fever cases: the report which I shall have the honour to present, will explain it.

Can you state to the Committee, from what neighbourhood the principal fever cases have come to your hospital?—A great many from St. George's parish, which is a parish in the borough; we have them from the poor-house. I thought the disorder was kept up in the poor-house, but they tell me that they were patients just taken in there, and then sent to us; a great many came to us from that place.

[The following Report was delivered in, and read:]

“ Half-moon-street, May 3d, 1818.

Dr. George Gilbert Currey has the honour of laying before the Committee of the House of Commons, a statement of such persons as have laboured under continued fever in St. Thomas's Hospital, as far as his information extends; and he has divided his report into two periods.

First, from the 4th September 1816, when he was elected physician to the hospital, to October 1817. And with regard to the above, it is necessary to explain, that on the 18th September 1817, Dr. G. G. Currey lost one of his colleagues, Dr. Wells, by death; and the other, Dr. Lister, on the following day, by resignation. Being unable to state the cases of patients who had been under their respective care, this period includes only Dr. G. G. Currey's own cases.

Second period, is from October 1817 to the 30th of April 1818, and includes the whole number of fever cases which have been under the care of Dr. G. G. Currey, and his present colleagues, Drs. Williams and Scott.

Statement 1st.

Number of Patients labouring under continued fever,	} 11, all recovered.
under Dr. G. G. Currey's care, from September 4,	
1816, to October 1817 - - - - -	

N. B. The whole number of Patients during this period was - - 363.

Statement 2d.

Ditto - - under the care of Doctors G. G. Currey,	} 126.
Williams and Scott, from October 1817 to April	
1818 - - - - -	

P. S. The Total of Patients - - - 641.

Of these 19 died.

Dr. G. G. Currey begs further to state, that he attended St. Thomas's Hospital, as a pupil, for some years, and was afterwards assistant physician to the hospital during 14 years; and although his duty in the above situation was confined to prescribing for such out-patients as could attend at the hospital, yet he can, from his own knowledge, state, that for ten or twelve years previous to 1816 the average number of fever cases were much below what they had been formerly; which remark applies, he believes, to all institutions of a similar nature.

The Committee will observe that the deaths bear a large proportion to the whole number; this is to be accounted for from the frequently advanced stage of the disease, and the wretched state of the patients admitted; many of them sent to the hospital even from the streets, having undergone every kind of privation, and often dying within thirty-six or forty-eight hours of their admission.

[The following Statement was delivered in, and read:]

HOUSE of RECOVERY, opened in 1802 :

	1802 to 1803.	1804.	1805.	1806.	1807.	1808.	1809.	1810.	1811.	1812.	1813.	1814.	1815.	1816.	1817.	1818.
Admitted - -	164	176	80	66	93	63	69	29	52	43	61	85	59	80	118	760
Discharged, } cured - -	142	167	71	57	80	55	60	21	43	36	50	73	47	68	99	695
Died - - -	13	17	7	6	14	5	11	8	8	6	11	13	7	14	10	62
Removed by } relations -	- -	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dismissed as } improper -	- -	- -	1	1	- -	1	- -	- -	- -	- -	- -	- -	- -	1	- -	1
Died, not of } fever - -	- -	- -	1	—	—	—	—	—	—	—	—	—	—	—	—	—

Lunæ, 4^o die Maii 1818.

The Honourable HENRY GREY BENNET, in the Chair.

Edward Roberts, M. D. called in; and Examined.

ARE you one of the physicians to St. Bartholomew's Hospital?—I am.

What number of patients does that hospital hold?—I think about 360 or 370; the hospital at present being under repair.

*E. Roberts,
M. D.*

When it shall be repaired, how many beds shall you be able to make up?—That is uncertain; it will depend upon the funds; I cannot speak to it; it is not in my department to know any thing about it.

From whence arises the funds to that hospital; is it supported by private contributions or legacies?—It is supported from legacies and estates.

Is it an hospital that requires a certificate to obtain admission?—Generally it is so, but not universally; in the case of fever, the subject of the present inquiry, the rule of the hospital is to receive at any time. Fever cases are received as accidents, beds being preserved for casualties; and the case of fever is considered in that light; we consider them as accidents.

Are you often compelled, for want of room, to refuse patients?—Yes, particularly of late, since our hospital has been under repair.

Do you think, when the repairs are completed, that necessity, namely, of refusing patients, will be done away with?—I suppose not altogether; it is extremely uncertain; one week we may have a great many patients desiring admission, and another week, perhaps, we may be able to receive them all; but it is seldom that we take the whole, particularly of late.

Have you had many cases of fever within the last twelve months?—Yes, there have been a great many.

Have you an account of the number of cases which have been admitted into that hospital during that period?—No, I have no account of them; in truth, we do not keep a register of distinct cases of disease.

Was the number, according to your recollection, much greater within the last twelve months, than the average of any given number of years preceding?—Yes; I have had a greater number of patients than usual; and I understand my colleagues also have had more than usual.

When fever patients arrive at the hospital, have you a separate ward, or do you intermix them with other patients?—No; we have not a separate ward, they are intermixed with the other patients.

E. Roberts,
M. D.

Have you instances of patients confined with other complaints, or nurses or medical attendants having caught the fever, which has been generated in the hospital?—I do not know that I could charge my memory with any instance; I never knew an instance of the disease having been communicated, generally speaking.

Are chronic cases mixed with the fever cases?—Yes, all the patients are indiscriminately mixed; they are placed where the beds are vacant; but we generally reserve the ground-floor for accidents, as being more convenient.

When this wing is repaired, and all the wards filled, how many patients do you think the hospital will hold?—About five or six hundred, certainly.

You have an immense fund?—No doubt; but our expenses are very great.

When a fever patient arrives at the hospital, what do you do with his clothes?—There is no particular attention paid to them.

Are they baked?—No; he is treated in the same manner as another patient.

Do you think that the collecting together, in an institution like the House of Recovery, of all the fever patients in the metropolis, would be better for their recovery, as well as for the prevention of the generation of the complaint, within any hospital in which they may mix with other patients?—Speaking not merely as my personal opinion, which may not be so satisfactory to the Committee, but also as that of the medical officers, I would beg to state that the question has been occasionally agitated amongst us, whether the fever patients should not be separated from the rest, and whether we should have fever wards; we have all been of opinion that this would not be so good a practice as now prevails, because we have not perceived that the fever has been communicated.

Are you not aware that recently, in consequence of fever patients being so introduced into some of the hospitals, there has been thereby a fever generated that has been not only fatal to nurses but also to medical attendants?—I cannot speak to that; I do not know any thing of it; there has been one argument used amongst us, that if fever be infectious, it is much more likely to be communicated, if congregated in large bodies.

Would there not be, supposing that the fever patients were assembled together, a plan of fumigating and ventilating the apartments, which is not consistent with other complaints, and which is necessary to prevent the spreading of fever?—I consider ventilation to be extremely useful; I have been instrumental in getting Bartholomew's Hospital ventilated as it now is; I took the subject up and was very earnest about it, and at length have got it adopted, by which means a current of air passes through the ward day and night.

Have you ever found that to be prejudicial to chronic cases?—I have regulated it according to the seasons; more in summer and less in winter: it is very spacious and lofty; the windows are very large.

Have you any account with you of the number of fevers which have been admitted into the hospital?—No, we do not keep a regular register of complaints, so as properly to distinguish them.

Is the number of fever patients so many now as during the last autumn?—Not in my department, at all.

Are they so in the hospital?—I believe not; I believe they are diminished.

You would say then, generally speaking, as far as your hospital is concerned, you consider the fever as declining?—I should think so, certainly.

Is it not probable that it will revive again in the autumn?—It is probable that there will be more cases in the autumn.

From your observation on the description of epidemics, do they not generally last longer than one year; the fever lessening in the spring, and as the summer approaches, and then returning again in the autumn, nearly with the same violence as it possessed originally?—There is a great deal of uncertainty about it; it is difficult to say: I have been physician to the hospital twenty-four years, and have never seen the complaint communicated from bed-side to bed-side, but it may have happened: I have seen people who have taken fever in a hospital, but it has been so rare an occurrence that I do not think I can recollect three instances.

Are you of opinion that fever is not generally communicated?—After what I have said, I should say, I think not, except under particular circumstances; otherwise, if we had a fever case brought in, we might expect that it would be communicated. We sometimes have patients brought in upon deal boards, and in some instances, even come in and die there in a very short time, in a state of the highest putridity: we should expect, if a patient of that description were put into a ward for forty-eight hours,

hours, that ward would be affected; but I never have been able to trace fever from such a cause. I never saw such a thing happen.

*E. Roberts,
M. D.*

Is it your opinion that typhus is not communicated?—I should say not, under particular circumstances; if there was free ventilation, I should suspect not.

Has the fever for the last twelve months been severe?—I think not, from my own observation; most of the patients have recovered.

Can you give the Committee any account of the proportion of deaths that you have had?—I have no mode of ascertaining that; the Committee are to understand that we have patients brought in under various circumstances; there are many who are sent there that die in a few hours.

Thomas Young, M. D. called in; and Examined.

ARE you physician to St. George's Hospital?—I am.

What number of patients does it hold?—I believe, about 220.

*T. Young,
M. D.*

Is it an hospital which is supported by private contribution?—Entirely by private contribution, including legacies.

Is it necessary to have a certificate prior to admission?—A certificate of admission is necessary; it should be signed by a governor.

In case a patient were to knock at the door, suppose an accident or fever, would he be admitted?—In case of accident he would; in case of fever not, regularly.

What is the weekly receiving day?—Wednesday.

Are you often obliged to refuse patients for want of room?—Frequently.

When fever patients are admitted to the hospital, do you put them into a separate ward, or mix them with others?—We mix them with the others.

Have you found any inconvenience arising from that practice?—None, materially; there was a doubtful case last summer, supposed by some to have taken a fever from another patient in the hospital; but the two physicians who saw him were not decidedly of opinion that it was so; this was the only instance that came within my knowledge.

How long have you been physician to St. George's Hospital?—Seven or eight years.

And since that period you do not recollect any other instance in which that fever has been generated in the hospital?—No, I do not.

How many cases of fever had you in the last twelve months?—I believe from forty to fifty; I cannot speak positively.

Was it a greater average than in ordinary years?—It was much greater than the average of the ten or twelve last years; but I believe not greater than the average of fifty years.

Do you consider that favourable average of the last ten or twelve years has arisen from fevers having been much rarer in the metropolis than formerly?—Yes, I believe so.

What has been the extent of the mortality, in those cases, during the last year?—I believe one in ten.

Is not that in a less ratio than in ordinary seasons?—I should think it was; the fevers have not, generally speaking, been severe ones.

Can you furnish the Committee with a register of the number of fever cases you have had in the hospital?—No, I cannot.

Is there any register kept in the hospital, whereby a person may procure such an account for any given number of years?—There is none kept.

Have you no fever ward?—None.

Do you think it would be advisable so to extend the House of Recovery as to be able to adapt it to the number of fever cases arising in the metropolis, subjected, of course, to a police of its own?—I think that plan might have its inconveniences; there might be advantages and disadvantages attending it.

What should you consider as its peculiar disadvantages?—I should think it probable, that the disease being more concentrated, it would be more easily communicated to the nurses and physicians, and to pupils.

Are you aware at all of the great result of that great experiment which has occurred at Manchester?—I am not: with respect to the present state of fever, I would beg to observe, I have two severe cases; there are rather more cases than we had last month.

Has

44 MINUTES OF EVIDENCE BEFORE SELECT COMMITTEE

*T. Young,
M. D.*

Has the same number of patients been admitted into the hospital within the last month as usual?—Yes, rather a greater number; on the last admission day I had two cases of fever; on the preceding admission day I had none.

Then from the state of your hospital you would not think fever much on its decline?—No, not much on its decline; it declined in the course of the last two or three months, and has increased again.

In general, do not these fevers exist in the autumn of the year with greater violence than in the spring or summer?—In general.

Then may we not be prepared for an increase of the fever in autumn?—As far as the facts authorize us to judge, we may expect it.

G. L. Tuthill, M. D. called in; and Examined.

*G. L. Tuthill,
M. D.*

YOU are physician to the Westminster Hospital?—I am.

What number of patients does it hold?—There are 85 beds.

Is it an hospital which may be considered as a free hospital?—Certainly.

So that any body who is ill, knocking at the doors, would be taken in, even without a certificate?—If it was an accident, otherwise it requires a recommendation of a governor.

Is it supported by voluntary contributions?—Yes, it is supported by voluntary contributions.

Is a case of fever considered as an accident?—I never knew an instance of fever being refused, though it did not happen to come on a regular day.

What is your regular day of admission?—Wednesday.

Do you generally have a greater number of patients applying for admission than you have beds?—Almost always.

Have you had a greater number of cases of fever last year than usual?—We have had more than usual.

Can you furnish the Committee with an account of the number?—From Lady-day 1817 to Lady-day 1818, there have been 38 cases of fever admitted into the hospital.

Is that a much greater number than an ordinary average?—It is greater. I can furnish the Committee with the numbers for the last four years, which were taken from the books of the hospital; from Lady-day 1814 to Lady-day 1815, there were 24 fever cases in the hospital; from Lady-day 1815 to Lady-day 1816, there were 26 cases; from Lady-day 1816 to Lady-day 1817, there were 15 cases of fever; therefore the number 38 is considerably greater than an ordinary number.

Is the number of the first two years what you would take as an ordinary average?—I think the ordinary average would be 25 in a year.

Out of that number can you state to the Committee what has been the ordinary mortality?—I think it has generally happened in ordinary years that one in ten have died; but this year, in which the number has been greater, the mortality has been less, amounting to about two, in the hospital, out of thirty-eight.

When you have a fever patient admitted to the Hospital, where do you place him; have you a fever ward?—We have not.

You mix them with the other patients?—We do.

Have you ever found any inconvenience to have arisen from that?—Never, that has come within my knowledge; no fever has been generated.

Of course your hospital is well ventilated?—We endeavour to do it as well as we can; but it is a badly constructed hospital, the wards are small.

Would it not relieve you considerably, if all the fever cases which now are taken to your hospital were removed and concentrated together in one establishment?—I do not think that would be the case at all; with respect to numbers it would be a relief; but I do not feel any inconvenience in the present practice.

Do you think, that supposing the fever establishment was regulated after the manner suited to the disease, that any danger would arise from congregating in one mass many patients attacked with fever?—I do not foresee that it would.

Henry Herbert Southey, M. D. called in; and Examined.

*H. H. Southey,
M. D.*

ARE you physician to the Middlesex Hospital?—I am.

How many patients does it contain?—It generally contains from 160 to 170.

Is that the number of beds you can make up?—Yes.

Is

Is it an hospital supported by voluntary contributions?—Entirely so.

Is it one of free admission, or is it necessary to have a certificate?—Accidents are admitted without any recommendation; but a recommendation is required with other cases.

Are fevers treated as accidents?—They are admitted all days in the week with letters of recommendation; I believe, in no instance are they sent away.

The Committee understand you to say, that in no case they are sent away, but that the rule of the hospital is, not to admit fever cases without a letter of recommendation?—Exactly so.

Have you had a great number of fever cases last year?—A greater number than usual.

Can you furnish the Committee with an account of the number?—120 in the whole of the year of 1817.

Is that a greater average than in ordinary years?—Much greater.

What was the average of the three preceding years?—About sixty.

What has been the mortality during the last year?—Less than usual; somewhat less than one in sixteen during the last six months, and taking the whole year, one in thirteen.

Have you a fever ward?—We have no fever ward.

Fever patients then are mixed with the others?—They are.

Have you ever found any inconvenience arisen from that?—Never.

You never have had any fever generated in the hospital?—Not since I have been connected with it; nor before, as I am informed.

Do you think, then, that there is any insecurity in mixing fevers up with diseases of another nature?—I must apprehend the danger to be little, where free ventilation and cleanliness prevail. My own experience would lead me to conclude that the danger was trifling.

Did you ever visit the House of Recovery?—No.

Do you think that it would be attended with any danger, to concentrate together the fever cases of the metropolis into one establishment, thereby relieving the hospital from the burthen of the different cases which arise?—I should think it would be attended with some little additional danger to the medical men and nurses.

Of course it would be a relief to your hospital, in point of numbers?—We have still spare wards, so that we do not want any relief to our number.

Are you ever obliged to refuse cases for want of room?—Not for want of room, but on account of our funds not allowing us to open all our wards.

The Committee understand you to say, that you have wards, but fail in funds to open them for the purpose of setting up more beds; in consequence of which, you are obliged to refuse admission to patients?—Yes, we generally have to refuse patients every receiving day.

Henry Clutterbuck, M. D. called in; and Examined.

HAVE you had more fevers than usual, during the last twelvemonth, in your institution?—The number of fevers during the last year, in the General Dispensary, of which I am one of the physicians, has been much greater than for at least ten years preceding; and has probably exceeded the whole number that have occurred during that period.

What do you consider as the mean number of fevers in your institution, in common years?—Formerly, as I have learned from my predecessors in office, fevers made a large proportion of the cases in the General Dispensary; but for the last ten or twelve years in which I have been connected with the institution, they have been remarkably few and mild, and on that account have not been very accurately registered. As far as I can judge, however, from my own registry of cases, I do not think the mean number in those years (with the exception of the last) of fevers, of that degree of severity which has been lately called typhus, can have exceeded ten or twelve.

What has been the number during the last twelve months?—No general register of cases being kept in the dispensary, I am unable to give a precise answer to this question; but, from my own notes, I may venture to state, that there have been at least 200 cases of fever admitted to the institution during the last year.

What degree of severity?—By much the greater number have been mild, and without danger. Some, however, have been severe, and a very few fatal. The number of fatal cases, I have reason to believe, has not exceeded three or four. It is proper to

H. Clutterbuck,
M. D.

add, that some of the cases admitted into the Dispensary were afterwards removed to the *Fever Institution*, and may have died there.

Is it not part of your duty, as physician to the General Dispensary, Aldersgate-street, to visit the poor at their own houses?—It is.

In most of the cases of fever that you have visited, did you propose to the poorer class of people a removal to the *Fever Institution*?—No; we found that the *Fever Institution* was full at the early period of the year.

If the *Fever Institution* had been large enough to have contained the cases of fever that were in daily occurrence, should you not have thought it better to have removed the patients out of their own houses to that institution?—Not under very favourable circumstances; but in many instances where the poor were ill provided with comforts and ventilation, and means of sustentation, I should have thought that advisable.

Were many of the poorer classes which you visited lodging and living in crowded alleys?—Yes; many of them in a very unfavourable situation.

Is it not your opinion that the contagion, in consequence, must have been much greater?—Undoubtedly.

Did any cases ever come to your knowledge, in which whole families were taken ill of the fever?—Yes, I think I may say so.

Then, if the first patient had been removed, the others probably would not have taken the disease?—I think not, if removed early.

Generally speaking, is there not always a degree of typhus fever prevailing in that part of the metropolis with which you are acquainted?—I think, for months together we have had no case of fever in the dispensary, and that, frequently, during the last ten years.

Recently the disease has assumed a very formidable aspect in point of number?—Yes.

Do you think the *House of Recovery* large enough, in its present establishment, to hold the ordinary average cases of fever that occur in the metropolis?—I should conceive it is large enough to receive all the cases which occurred during the last ten years; but not at all equal to the last year.

Of course the contagion must have been very much spread by the continuance of persons in their own houses?—Undoubtedly.

Were any of those patients whom you attended proposed for admission into the other hospitals of London who take in fever cases?—We always consider that there is an objection on the part of the other hospitals to receive fever cases; but I do not think any were sent from the dispensary.

Generally, is it a feeling among the medical persons attending the dispensary, that fever cases are objected to by the hospitals, that they ought not to receive them?—Generally, I think it is so.

So that you preferred keeping them in their families to sending them to places where probably there was not room?—Certainly.

John Yelloly, M. D. again called in, and delivered the following Report, which was read.

REPORT on the state of Whitechapel Workhouse.

J. Yelloly,
M. D.

WE, the undersigned, having, on the 14th of October instant, minutely inspected the various parts of the Whitechapel workhouse, in company with Mr. Curtis, the surgeon to that establishment, for the purpose of examining into the state of the same, and giving our opinion as to the best mode by which the occurrence of fever is to be prevented; have the honour to make the following Report:—

1. That cases of fever have occurred, to a greater or less extent, in every ward of the house, particularly in the basement wards, for a very long time past; and more especially since last February.

2. That many of the cases were of persons recently admitted into the house from various parts of the parish; a few consisted of such as came in with fever actually upon them; and a considerable number of such as had been long resident in the house.

3. That almost all the children in the house have, at one time or other, been affected with fever; that few of the nurses have escaped the disease, and that some of the adults, but many of the children, have been attacked with it, two, three, or even more times.

4. That the wards, with the exception of those on the basement floor, are in general large, lofty, and light; that fumigation with acid vapours are, to a certain extent, employed in them; but that they are all, with one unimportant exception in Sam's ward, without permanent or adequate ventilation; and those on the basement floor are low, ill-ventilated, and damp, as are some of the workshops, particularly that of the boys.

5. That the beds are in general too thickly placed, and the wards too much crowded.

6. That there are no waterclosets, though there are places reserved for them in most of the floors; and but one common privy in the whole house for the men, and one for the women; that the wards are only partially white or limewashed, and some of them have not been done so for several years; that the beds are of feathers or flock, and the bedsteads for the most part of wood.

7. That fever patients are removed to peculiar wards as soon as they are seized with the complaint, and are sent to an intermediate or convalescent ward for some time previously to their return into the house at large; but that there is the same want of ventilation in those wards as the others, and that there is a very sufficient quantity of accommodation for persons attacked with fever, as well as for the sick in general.

WE have thought it necessary to bring these statements to the view of the trustees, as the result, not only of our own observation relative to the present state of the house, but of the information which we obtained from Mr. Curtis, and the other officers of the establishment who accompanied us in our inspection; and we now beg to give our opinion as to the arrangements which seem to us necessary for carrying into effect the object of our consultations.

1. The beds should be placed at a greater distance from each other; and never more than two persons, whether adults or children, should sleep in one bed, in health; nor more than one in fever or other illness.

2. The basement floor should be totally abandoned as a place of residence for any of the inmates.

3. The wards should, as much as possible, have thorough air admitted into them by windows in opposite aspects; and a permanent ventilation should be established in each, independent of the power of any individual to interrupt it. This may at once be done by an opening made over each door, and by ventilations in the windows; and may be still further effected by the construction of permanent ventilations.

4. A part of the workhouse should be set aside for an Infirmary, and not less than one ward for men, and one for women, should be appropriated to fever cases. Into these wards every case of fever should be admitted from any part of the house; but as it does not always happen that such cases are distinctly marked at their commencement, we should recommend that a small ward should be set aside for the reception of doubtful cases, till they exhibit unequivocal marks of their nature, when they can be either sent to the infirmary, or to the proper fever wards. Communication between this and the other parts of the house should, as much as possible, be prevented; and before the fever patients are returned to the house at large, they should be, for some time, as is at present the case, in an intermediate or convalescent ward.

5. A system of limewashing and fumigation, either with nitrous or oxymuriatic acid gas, should be in continual employment over every part of the house, whether it may have been oil-painted or not, till the tendency to fever has subsided, and then limewashing should be regularly repeated at intervals, not greater than six months. For the purpose of allowing this regular and successive process, one male, one female, and one infirmary ward should always be kept vacant, in order to admit the necessary removals.

6. The number of inmates should be reduced to the limits which the workhouse can contain, under the changes recommended above, by removing the extra number to some house to be taken for the express purpose of their accommodation. The removal may either take place of the healthy, giving the sick accommodation in the house; or the sick may themselves be removed to a proper house, giving up the workhouse wholly to the healthy.

7. The workshops should be separate from the body of the house, and should be airy and well ventilated. They, as well as the other wards of the house, should have

48 MINUTES OF EVIDENCE BEFORE SELECT COMMITTEE

J. Yelloly,
M. D.

(Report on the
State of White-
chapel Workhouse.)

have fires in them in cold weather, as we believe, indeed, is now for the most part the case.

8. Waterclosets should be placed in some parts of the house; the bedsteads should, as much as possible, be made of iron, and the beds should be filled with straw instead of feathers or flock, and the straw frequently changed.

9. Persons on their admission into the house should be washed in a warm bath; their hair, when long and dirty, cut, and their clothes cleansed. Cleanliness should be steadily enforced both as to the persons and clothing of the inmates, and the bedsteads, bedding and furniture of the apartments, and the clothing of sick persons, and particularly fever patients, should be carefully cleaned, and well aired and fumigated.

10. It would likewise be highly important, in our opinion, for the Trustees to direct, that limewashing and fumigation should be employed for the purpose of purifying such apartments of poor persons in the parish as may have had fever in them; for in this way an important and growing source of febrile contagion will be cut off at a very moderate expense.

In concluding this Report, we beg to add, that the means hitherto so judiciously employed by the Surgeon for checking the progress of febrile disease, have proved ineffectual, principally from the want of ventilation, from the crowded state of the house, and from the constant demands upon it requiring the occupation of improper wards.

London, Oct. 22d, 1817.

Algernon Frampton, M. D.

Isaac Burton, M. D.

John Yelloly, M. D.

To the Trustees of the Workhouse of
St. Mary Whitechapel.

Martis, 19^o die Maii 1818.

The Honourable HENRY GREY BENNET, in the Chair.

Edward Holme, M. D. called in; and Examined.

Edward Holme,
M. D.

ARE you physician to the Manchester House of Recovery?—Yes, I am, and have been since its establishment.

Have any of the nurses or medical people been attacked by contagious fevers, generated in the House of Recovery?—Certainly not.

When first that institution was established, was there a great prejudice existing in the minds of the people in the neighbourhood, that the infectious fevers would be continued by means of it?—Certainly.

Has that prejudice altogether ceased?—Entirely.

Can you furnish the Committee with an account of the number of cases of fever, from the time of its institution?—I can.

[*The witness presented the same; and it was read, as follows:*]

	Admitted.	Cured.	Dead.	Remain.
From 1796 to 1797 - -	371	324	40	7
— 1797 to 1798 - -	339	300	16	23
— 1798 to 1799 - -	398	360	27	11
— 1799 to 1800 - -	364	315	41	8
— 1800 to 1801 - -	747	645	63	39
— 1801 to 1802 - -	1,070	956	84	30
— 1802 to 1803 - -	601	539	53	9
— 1803 to 1804 - -	256	215	33	8

(continued.)

Edward Holme,
M. D.

(continued.)	Admitted.	Cured.	Dead.	Remain.
From 1804 to 1805 - -	184	144	34	6
— 1805 to 1806 - -	268	235	29	4
— 1806 to 1807 - -	311	258	33	20
— 1807 to 1808 - -	208	191	15	2
— 1808 to 1809 - -	260	223	21	16
— 1809 to 1810 - -	278	243	30	5
— 1810 to 1811 - -	172	153	15	4
— 1811 to 1812 - -	140	121	18	1
— 1812 to 1813 - -	126	109	13	4
— 1813 to 1814 - -	226	202	17	7
— 1814 to 1815 - -	379	337	29	13
— 1815 to 1816 - -	185	159	14	12
— 1816 to 1817 - -	172	158	6	8
			631	

From June 1817 to May 6, 1818, admitted - - - 387

Of these there died - - - 32

Discharged, cured - - - 314

Remain in the Hospital - - - 41

387

In the year from 1800 to 1801, there appear to have been 747 cases; from 1801 to 1802, 1,070; from 1802 to 1803, 601: can you give the Committee any reason why the increase should be so great in those three years?—I believe that an unusual scarcity of food prevailed at that time; that provisions were bad and high priced.

Is it your opinion that the fever, generally speaking, has been diminished in the neighbourhood of Manchester, since the establishment of the House of Recovery?—The effect of it in the first years of the establishment was certainly very remarkable, both in the decrease of the number of patients admitted into the infirmary, and the diminution of the poor's rates.

You state that benefit to have been produced to a great extent in the early establishment of the institution; has it continued so at present?—I believe it has; perhaps not in the same degree.

To what cause should you attribute the late alteration?—To a relaxation of the rules originally established.

In what way does that relaxation affect the objects of the establishment?—When the fever-wards were first established, a person was appointed to inspect the houses from which every individual patient was removed, to see that the clothes and bedding were duly purified; or in cases where that was impracticable, that they should be consumed and the value paid to the owners.

Has that practice ceased?—The practice was partially renewed during the prevalence of the late or present epidemic.

And of course has been attended with the same beneficial effects?—I think it has not been carried to that extent that I could speak to it: the epidemic has ceased so far that it is no longer formidable.

QUESTIONS submitted to *B. Davies, M. D.**B. Davies, M. D.*

HAVE you had more fevers than usual, during the last twelve months, in your institution?—I certainly have. In the course of eight years that I have been physician to the London Dispensary, I have never had, in one year, so many cases of fever in it as in the last twelve months. In the Surrey Dispensary, of which I am also physician, I have had a great many cases of fever during the last year. In the Universal Dispensary for Children, of which I am likewise physician, I have had a great many cases of fever in children during the last year, similar to the fever which I have met with in adults.

What do you consider as the mean number of fevers in your institution, in common years?—The mean number of fevers, of different descriptions, under my management in the London Dispensary, during a period of eight years, has been about one hundred annually.

What has been the number during the last twelve months?—In the last twelve months I have had upwards of one hundred and ninety cases of fever under my care, in the London Dispensary; one hundred and twenty cases in the Surrey Dispensary; and ninety-nine cases in the Universal Dispensary for Children.—(The greater part of these occurred between May and November.)

What degree of severity?—The fever I have seen has been a continued fever, of mixed character; not malignant putrid fever, or the worst kind of typhus; not inflammatory fever; but a fever of a typhoid nature, of considerable severity. About one in twenty-two died.

Do you think that any institution capable of receiving the cases of fever arising in crowded apartments, would be for the public benefit?—It is of great importance in the treatment of fever, to remove patients from crowded apartments; but I disapprove of the plan of putting together, in one ward, several patients ill of fever, as is the case in hospitals. I am of opinion, that an institution capable of receiving the cases of fever which arise in crowded apartments, would be beneficial to the public, provided the same could be constructed upon such a principle (and I have no doubt it might) as to preserve the patients separate, by appropriating to each a room having a door and window to it; and that such institution or house of recovery could be established out of town.—(Should it meet with the approbation of the Honourable Committee, I shall be happy to furnish a plan, explanatory of my ideas of the kind of building best suited to answer this purpose.)

QUESTIONS submitted to *Mr. William Lincoln.**Mr. W. Lincoln.*

1. HAVE you had more fevers than usual, during the last twelve months, under your care?

2. What do you consider as the mean number of fevers under your care, in common years?

3. What has been the number during the last twelve months?

4. What degree of severity?

5. Do you think that any institution capable of receiving the cases of fever arising in crowded apartments, would be for the public benefit?

As I am not aware that there has been any variation in the number of fever cases in my private practice, of late years, I mean the following answers to relate to parochial patients only.

1. I have had more cases of fever than usual under my care within the last twelve months.

2. In common years, the number of fever cases have been between 40 and 50.

3. During the last twelve months the cases of fever under my care may be estimated between 250 and 300.

4. They have been almost uniformly of a mild nature, being very rarely fatal when not exasperated by circumstances not naturally accompanying the fever; at the same time the disease has been extremely contagious.

5. The removal of persons afflicted with this fever into a fever hospital, has diminished, in some degree, the contagious effects; but they frequently relapse after their return to their own habitations.

William Lincoln.

A P P E N D I X.

— No. 1. —

PROJÉT for the Enlargement of the HOUSE OF RECOVERY.

TO elevate the building, and make Wards over the whole of it ; by which means one half of the present number of patients can be accommodated, more than what the house now contains.

To make a Wing in the further end of the building, of similar height to the present building when raised, which will admit, I should imagine, one half of what the whole house, when raised, will contain.

Present building contains	-	-	-	-	70
When raised, one-half more	-	-	-	-	35
					<u>105</u>
Being added	-	-	-	-	53
					<u>158</u>

ESTIMATE :—The Fever House of Recovery.

Proposed alteration, in raising the centre part of the building	}	£. 2,500.
an additional story, and converting the wings into rooms		
fit for the reception of 35 patients		

North Place, May 13, 1818.

— No. 2. —

St. Giles's Workhouse, Broad-street, St. Giles,
May 5, 1818.

Sir,

IN compliance with your wish, I beg leave to say, in answer to the

1st Query, That the number of Fevers under my care has been considerably more during the last twelve months than any former period.

2dly, About 150.

3dly, Nearly 600.

4thly, Principally *synochus*, or mild typhus.

5thly, Certainly so, within the last twelve months.

I have the honour to be,

Sir,

Your obedient humble servant,

J. Burgess, Apothecary.

To the Hon. H. G. Bennet, M. P.
Chairman of the Committee to inquire into
the state of Fevers in the Hospitals.

— No. 3. —

CASES of Fever have been more frequent in the district of the Finsbury Dispensary, during the last twelve months, than for several years preceding.

The mean number of Fevers annually in the above Institution is 66.

The number, from the 1st May 1817 to 1st May 1818, was 168.

In general, the disease has been mild; occasionally, however, even in houses where the majority of cases were of the above character, it has shown symptoms of the utmost malignancy, and proved fatal. So far as I have had an opportunity of observing, when persons of a higher station in life have become affected, the disease has been generally more severe.

I think that an Institution, into which persons labouring under fever could be immediately, and at all times admitted, upon the certificate of a competent judge of the complaint, would be of public benefit. But if, on the plan of some Hospitals, an order from a Governor must be obtained, and admission delayed to the regular day of receiving patients, which is generally once a week, such an Institution I should consider of little utility, as contagion would continue to spread in families, whilst its source remained amongst them.

I am of opinion that the intercourse of the Medical Officers of Dispensaries with the poor at their habitations, has tended greatly to check the progress of contagious disease: the poor are warned of the danger, and taught the means of avoiding it. Fevers generally begin with a sense of chilliness, and are supposed to arise from exposure to cold; the sick is in consequence loaded with bed-clothes, the external air is by every method excluded, and the inmates at length breathe a pestilential atmosphere.

H. Lidderdale,

Senior Physician to the Finsbury Dispensary.

Falcon-square, May 8, 1818.

To the Hon. H. G. Bennet.

R E P O R T

FROM THE SELECT COMMITTEE ON THE
Contagious Fever in Ireland.

Ordered, by The House of Commons, to be Printed, 8 May 1818.

THE SELECT COMMITTEE appointed to inquire into the state of Ireland, as to the prevalence of Contagious Fever in that part of The United Kingdom, and to investigate the causes, temporary and permanent, which have led to the increased progress of this destructive Malady during the last and present year, and to report the same, with their Observations thereupon, to The House; and also to report such measures, remedial and preventive, as may seem most efficacious to arrest its further extension, to guard, as far as human foresight can provide, against its recurrence, and to secure adequate means of support to the Establishments destined for the relief of the Diseased;—

HAVE considered it their duty, in proceeding in the task allotted to them, to pursue the course which the order of reference has pointed out, of ascertaining, in the first place, as far as they were enabled to do, the State of Ireland, as to the increased prevalence of Fever during the last and present year; the period from whence the commencement of that increase may be dated, in different parts of that Country; the extent to which it has proceeded, and the present condition, whether of diminution or increase of the malady in different districts; together with their reasons for believing that such diminution or increase may be progressive, or that the disease has assumed a more permanent character.

The great increase of this malady may, we think, be dated pretty generally through the Island from the Spring of 1817; in some places commencing with the months of March or April, in others, not until July, and even August. The Reports of the Fever Hospitals of Cork and Waterford, clearly trace the great increase of Fever in those cities to a period much earlier; in Cork as far back as the Autumn of 1816; in Waterford to January 1817. We advert to these reports particularly, because, as far as respects these large and populous cities, they furnish, in detail, the most ready means of judging accurately as to the progress and extent of the disease, from the monthly tables of admissions and deaths which are annexed to them. From Belfast also, we have the monthly returns of that Fever Hospital, in which the material increase is noted as commencing with the month of August. Of Limerick, where the disease appears to have raged very violently, we only know that nearly 2,600 Fever Patients have been under cure in the Hospitals during the last year, and 794 to the 5th of April of the present year. With respect to Dublin, the very accurate and detailed report of the Medical Board, presented to the Lord Lieutenant on the 16th of March last, which we have given in the Appendix, together with several other documents, shows the great and rapid weekly increase of Fever in the Capital from the 1st September 1817, when the entire number of Fever Patients in all the Hospitals amounted to 218, to the 28th February 1818, when it had

ADMISSIONS.

In Waterford,

in 1814	- -	175;
Do - in 1815	- -	403;
Do - in 1816	- -	307;
Do - in 1817	- -	930.

No application for Admission fruitless.

Deaths, as one to 26.

Admissions in Belfast :

One year to May

1816	-	102;
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1 do to May 1817, 196;

Eleven months to

1 April 1818,	-	1,450.
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In May 1817

-	25;
June	- - - 29;
July	- - - 38;
August	- - - 76;
September	- - - 164;
October	- - - 201;
November	- - - 200;
December	- - - 228;
January	- - - 193;
February	- - - 142;
March	- - - 154.

risen to 1,001, and on the 14th of March to 1,074, making an aggregate of admissions into all the Dublin Hospitals, which from time to time had been fitted up for their reception, of 7,451, during a period of seven months. This Report evinces also the anxious and laudable care and solicitude with which the *Irish* Government has supplied medical and other assistance and accommodation to the diseased, in the Metropolis. Their attention however, has been extended to other parts of *Ireland*, as will appear from the following advertisement published the 30th of September 1817:—

“Dublin Castle, 30th September 1817:—SEVERAL Applications for assistance having been made, to the Lord Lieutenant, from districts of this country, wherein contagious fever is still prevalent; and His Excellency being anxious to co-operate with those who are making local efforts to check the progress of infection, and to administer to the wants of the poorer classes of the inhabitants who are suffering from fever, He has appointed a Committee of gentlemen of this city to meet at the Medical Board Office, for the purpose of receiving and reporting upon such applications.

“The interference of Government must necessarily be limited to those cases wherein it shall appear, from written documents, that fever is still prevalent to an unusual extent, and that hospitals have been opened, or accommodation provided for the relief of the sick, by means of subscriptions of the wealthier part of the community.

“In aid of such subscriptions, and on the recommendation of the Committee above-mentioned, the Lord Lieutenant will direct pecuniary aid to be granted, to be applied strictly in counteracting the effects and checking the progress of infectious disease; and apportioned in amount, according to the exigency of each particular case.

“Applications, accompanied by documents, stating the number of sick accommodated, the means provided for their relief, and other particulars of this nature, addressed to “The Committee, No. 5, Parliament-street,” may be forwarded by post, under cover, to the Chief Secretary, Dublin Castle.

(Signed) *Robert Peel.*”

Your Committee are strongly impressed with an opinion that public aid should still continue to be extended, according to the judgment of the Executive Government, on the terms on which it was offered by this advertisement; and that powers should be vested in the Government, by Parliament, for that purpose.

Of the extent to which the disease has prevailed, the melancholy details which we have already given, may in some degree enable the House to judge, when we add, that in Cork the number of Fever Patients is stated during the year ending 1st December 1817, to have amounted to more than 8,200, and from that time to the 29th of March last to 3,300: the deaths during the preceding period have been to the number of admissions as 1 to 26. In Waterford in 1817, the number of admissions was more than 900. In Belfast, from May 1817 to April 1818, 1,450. In many parts of the Country too it appears to have prevailed very extensively, particularly in the vicinity of Moate, Boyle, and Navan, where, from a limited population, many hundreds appear to have been afflicted, and in Armagh above two hundred to have been sick at one time. As to the extent to which it has affected the country parishes we annex the only account received in detail; that of Lough Gall, near Armagh, where of a population of 8,000, 1,009 have been ill, and the deaths as one in ten. From the want of Dispensaries or Hospitals generally dispersed, we have no detailed accounts of a very large part of Ireland, nor any account whatever of some entire counties, as Mayo and Donegal, except a statement that in this latter county it has prevailed very considerably; we can however have no doubt, that where no such establishments existed, great numbers of the poor must have undergone very great sufferings. One of the causes to which the progress of the disease is very generally ascribed, the crowds of wretched mendicants, by whom the country has been traversed in all directions, affords a melancholy proof and illustration of this opinion.

The

In Kilkenny
Fever Hospital,
Admitted from
1 January 1816 } 165;
to 1817 - }
1 January 1817 } 757;
to 1818 - }
1 January to 16 } 375.
March 1818 - }
Moate, 1,200 sick be-
tween June 1817 and
March 1818.
Boyle, 800 ill between
May and October
1817.
Navan, 11 months de-
cided continuance in
two-thirds of the families
of all ranks, and but
very few of the families
of the Poor free from
the disease. Mortality
one in ten.

The mortality has been much greater among the higher ranks of society, whom the disease has attacked, than in the labouring classes; and the physicians and other medical attendants, as well as the clergy of different denominations, have felt its destructive force in much more than an ordinary proportion, as the discharge of duty, uniting with the claims of humanity, exposed them peculiarly to its visitation.

The extent of the disease seems in general in some degree diminished, as far as we at present possess information; in Ulster very considerably indeed. Whether the diminution may or may not be progressive, and in what degree, it is very difficult to form any judgment; more especially as it has frequently abated for a time to break out with renewed violence; in the cities of Cork and Limerick too, the numbers seem to be on the increase. Of the causes, to which we are to trace a malady so distressing and extensive, we cannot convey our opinion more clearly than by adopting the forcible expressions used by the Medical Board, dated 1st May last, and transmitted by Dr. Renny, which are as follows:—"As the health of the country at large, is an object of great interest, I think it right to state, that by reports now before me, of a late date, from the Staff Medical Officers superintending the provinces of Leinster, Munster, Connaught, and Ulster, as well as from a variety of letters written by respectable medical correspondents, and connected with the Army, it appears that Typhus fever is generally on the decline. All these authorities, however, concur in dwelling on the continuance of the privations, under which the lower orders in Ireland have suffered so severely for some time past, and to which the origin of the existing epidemic is very much owing; and that numbers of wandering beggars are at present roaming over the face of the country, and appear on the increase.

Vide letters from Ross, Tralee and Curnew, as supplying striking proofs of this position.

It is quite evident, therefore, that Fever will prevail, to a greater or lesser degree, while these predisposing causes continue to operate so extensively, and that we must look beyond medical judgment and medical exertions, for palliating or removing the present heavy affliction. The wisdom and energy of the Legislature, and of the Government, may perhaps do something in this matter; but it is very difficult to find an effectual remedy for poverty, the cause and continuance of which are mainly to be ascribed to a rapidly increasing population, whilst the means of procuring productive labour and employment for the multitude, instead of advancing with some proportion, as yet remains nearly stationary."—

But until some adequate means can be devised, for the removal of those evils, it becomes our duty to suggest such measures, as appear to us immediately necessary to check the progress, to mitigate its severity, as well as to secure to the institutions destined to its relief, due and adequate protection; and with this view we offer to the House the following Recommendations:

1st. THAT the subscribers to Fever Hospitals be incorporated in like manner, and with like powers as the subscribers to Houses of Industry in Ireland now are.

2ndly. THAT the General Dispensary Act should be amended, and that the powers now possessed by Grand Juries of counties to present for the support of such establishment, be extended to counties of cities, and counties of towns.

3rdly. THAT upon proof of a sum subscribed, and paid by the subscribers, for the erection or hiring of or attaching to any Dispensary a House, to be applied to the reception of Fever Patients, and upon medical certificate of the necessity of providing accommodation for such patients, it shall be lawful for the Grand Jury to present a sum, equal in amount to double the sum actually raised by subscription; and such further sum annually for the support of the houses so hired or erected, as shall not exceed double the amount of the subscription actually raised for their support.

4thly. THAT it is highly desirable that some exemptions from the Hearth and Window Taxes should be granted to lodging houses, under certain regulations, so calculated as to secure the benefit of such exemptions to the persons who lodge therein.

5thly. THAT it is expedient, in those cases wherein there is no Fever Hospital at present, that the Grand Jury should have a power of presenting such sum as they may think necessary for the construction of One Fever Hospital in each county, in such situation as to the Grand Jury may seem most desirable :

THE Lord Lieutenant to have a power of issuing the sum necessary for the construction of the Fever Hospital, to be repaid by instalments within the period of six years :

In cases where there is a Fever Hospital at present, the Grand Jury may present a sum for enlarging or altering such hospital, if deemed necessary ; the sum to be repaid in like manner.

6thly. THAT in order to preserve the country from the spreading of contagion, it is recommended, that on the Fever appearing in any city, town or district, under such circumstances as to warrant the apprehension of its more extended progress, it would be proper that such city, town or district be enabled to hold a meeting under the authority of one or more magistrates, and to certify to the Lord Lieutenant the necessity of constituting in such district a Board of Health, to exist during the continuance of such emergency, to be composed of the members of Dispensary Establishments, or Fever Hospitals, or a certain number of the more respectable parishioners and medical men of such district, where no Fever Hospital or Dispensary exists ; who should be armed, temporarily, with more enlarged powers to abate and remove nuisances, and to check contagion, than are extended to magistrates at present.

7thly, THAT the powers to be intrusted, temporarily, to such Board of Health be as follows :

That they should have power to cleanse all streets, lanes, yards and houses, and to remove from thence all nuisances prejudicial to health ; to cleanse, fumigate and whitewash infected houses, and to destroy or cleanse infected beds and bedding, to open windows, and to take such other measures for ventilation as may be absolutely necessary :

That wherever Fever Hospitals, or places for the reception of the diseased, are already established, to remove on certificate of one medical person, to such Fever Asylum, who shall not be certified by a medical person to be already under such care, and placed in such circumstances as to prevent the communication of contagion, so far as can be foreseen, to any other member of his family, or his neighbours :

To have powers to affix to any house where the disease prevails, a mark or sign, denoting that some of the inhabitants are infected with Fever.

The powers and the constitution of such Board, to be considered as entirely temporary, and to cease with the emergency on which they are founded.

8th May 1818.

SECOND
REPORT
FROM THE SELECT COMMITTEE ON THE
Contagious Fever in Ireland.

Ordered, by The House of Commons, to be Printed, 26 May 1818.

THE SELECT COMMITTEE appointed to inquire into the state of *Ireland*, as to the prevalence of Contagious Fever in that part of The United Kingdom, and to investigate the causes, temporary and permanent, which have led to the increased progress of this destructive Malady during the last and present year, and to report the same, from time to time, with their Observations thereupon, to The House; and also to report such measures, remedial and preventive, as may seem most efficacious to arrest its further extension, to guard, as far as human foresight can provide, against its recurrence, and to secure adequate means of support to the Establishments destined for the relief of the Diseased;—HAVE further considered the matters to them referred, and have agreed upon the following REPORT:

FROM the probable approach of the prorogation of Parliament, the Committee have been reluctantly compelled to postpone the very important task of a more extended inquiry into the permanent cause of the existence of Fever in the different parts of Ireland, which arise from want of employment for its industrious population, with a view to discover adequate means for their radical and effectual removal as far as may be practicable. They have confined their recommendations for the present therefore to the establishment of Hospitals for relief of the diseased, to securing the funds destined to their support, and to such means as appeared to them best adapted to arrest the progress of the Epidemic, under circumstances of calamitous increase.

An Act is in progress, whose provisions will, they trust, materially conduce to effect these desirable objects.

They cannot, however, terminate their sittings without earnestly impressing on the House, that the continuance of Fever in very many parts of Ireland, with little abatement, requires assiduous care and increased liberality from the Public in aid of the voluntary contributions, from which the hospitals for relief of the diseased in the country parts of Ireland, have hitherto, in a very great degree, derived their support.

This is the more necessary, since as the Medical Board have very truly stated, that with the exception of £.1,000 raised by subscription for the Cork-street Fever Hospital, the whole of the expense of providing for the Capital has been defrayed by Government, whilst in other cities and districts of Ireland, where Fever has prevailed to as great an extent, compared with

their population, the relief of the diseased has arisen, in a very great proportion, from Voluntary Subscriptions. They feel themselves more forcibly called upon to notice this, from observing the very great amount to which the voluntary subscriptions have extended on the part of the resident gentry and commonalty, especially in Cork, and their declared inability to continue, during another year, similar exertions; and that the favourable results which have accompanied the active exertions of Government in the decrease of disease in Dublin, fully justify them, as they believe, in this recommendation.

They have reluctantly been compelled to notice the very small amount of subscriptions which, in any of the lists laid before the Committee, appear to have been supplied by the wealthy non-resident landed proprietors of Ireland, with some honourable exceptions.

The Committee suggest the propriety of measures being taken to ascertain the extent of Fever, and the number of deaths from this period until the commencement of the ensuing session, generally throughout Ireland, by calling for returns from the Clergy of the several Parishes.

26 May 1818.

R E P O R T

FROM THE SELECT COMMITTEE

Appointed to consider the validity of the doctrine
of Contagion in the Plague.

Ordered, by The House of Commons, to be Printed,

14 June 1819.

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R E P O R T.

THE SELECT COMMITTEE appointed to consider the validity of the doctrine of Contagion in the Plague; and to report their Observations thereupon, together with the Minutes of the Evidence taken before them, to The House;—HAVE considered the matters to them referred, and have agreed upon the following REPORT:

YOUR Committee being appointed to consider the validity of the received Doctrines concerning the nature of Contagious and Infectious diseases, as distinguished from other Epidemics, have proceeded to examine a number of Medical Gentlemen, whose practical experience or general knowledge of the subject appeared to Your Committee most likely to furnish the means of acquiring the most satisfactory information. They have also had the evidence of a number of persons whose residence in infected countries, or whose commercial or official employments, enabled them to communicate information as to facts, and on the principle and efficacy of the Laws of Quarantine; all the opinions of the Medical men whom Your Committee have examined, with the exception of two, are in favour of the received doctrine, that the Plague is a disease communicable by contact only, and different in that respect from Epidemic fever; nor do Your Committee see any thing in the rest of the Evidence they have collected, which would induce them to dissent from that opinion. It appears from some of the Evidence, that the extension and virulence of the disorder is considerably modified by atmospheric influence; and a doubt has prevailed, whether under any circumstance, the disease could be received and propagated in the climate of Britain. No fact whatever has been stated to show, that any instance of the disorder has occurred, or that it has ever been known to have been brought into the Lazarettos for many years: But Your Committee do not think themselves warranted to infer from thence, that the disease cannot exist in England; because in the first place, a disease resembling in most respects the Plague, is well known to have prevailed here in many periods of our history, particularly in 1665-6; and further, it appears that in many places and in climates of various nature, the Plague has prevailed after intervals of very considerable duration.

Your

Your Committee would also observe, down to the year 1800, Regulations were adopted, which must have had the effect of preventing Goods infected with the Plague from being shipped directly for Britain; and they abstain from giving any opinion on the nature and application of the Quarantine regulations, as not falling within the scope of inquiry to which they have been directed; but they see no reason to question the validity of the principles on which such regulations appear to have been adopted.

14 June 1819.

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MINUTES OF EVIDENCE

Lunæ, 15^o die Martij, 1819.

SIR JOHN JACKSON, BARONET,

In the Chair.

Charles M'Lean, M.D. called in; and Examined.

YOU have been in the practice of medicine for a good many years?—Yes; thirty years.

*Charles M'Lean,
M. D.*

(15 March.)

Have you any knowledge of the Plague?—I have. In 1815, I employed myself in investigating that malady in the Greek Pest Hospital, near the Seven Towers at Constantinople. After administering remedies to the pestiferous patients of that hospital, and making observations on the disease for seventeen days, I found it expedient, being myself, as I had expected, seized with the malady, and the system of the pest house being incompatible with personal safety, to discontinue my researches. Upon my recovery, I proposed to resume them upon a plan that should better combine personal safety with a prospect of successful investigation: but the Porte did not think fit to accede to my propositions. The inferences supplied by my experiments were, however, sufficient to confirm, in respect to plague, those conclusions against the existence of contagion, which I had previously deduced, in respect to yellow fever, typhus and epidemic diseases generally. If it should be thought that this is but an inadequate experience, I would entreat of the Committee to recollect how little the value of experience may be commensurate with its duration; and that the result of experience in the application of false knowledge, is but dexterity in the practice of error; which is as much worse than mere inexperience, as false knowledge is worse than absolute ignorance. Since the establishment of the doctrine of contagion, I am not aware that any other physician now living has been experimentally in such intimate collision as myself, with what is called The Plague of the Levant; and if the result of my researches should ultimately prove adequate to dispel, in respect to the cause of that malady, the darkness of centuries, they will not be denied to be of unprecedented efficiency. Such of them as strictly relate to the object of the present inquiry, I have thrown into a summary, which I have had the honour of transmitting to the Chairman of the Committee, and to which I beg leave respectfully to refer them; taking the liberty to observe, that, in my opinion, it is only by a distinct consideration of the laws which distinguish epidemic and contagious diseases generally, that it is possible to determine, to which of these classes any particular malady belongs.

You consider the plague as not contagious?—Yes.

Explain how you caught the fever?—By the air. It was in August, the month in which the plague generally prevails most at Constantinople. I was a stranger to the climate, and otherwise under particular circumstances; the deprivation of food, insufficiency of nourishment, and also some degree of irritation of mind, under the idea that the people around me were endeavouring to frustrate my object; and all these might surely be sufficient to account for the occurrence of the disease during the pestilential season, without supposing contagion.

Do you use your words infectious and contagious synonymously?—In reference to what is known to be the general custom, I do so.

Have you ever seen an instance of a plague case imported into England, or heard of it?—Never; and after much inquiry I have reason to believe that it has never happened; as, if it had occurred, it would have been very likely to have been ostensibly recorded. I have reason to believe such an occurrence has never happened either during the existence of quarantine or before.

Charles M^rLean,
M. D.

(15 March.)

Nor in any of the vessels that have arrived at the place of quarantine?—No. I was going to mention a circumstance of great inconvenience to a gentleman arriving some years ago in a vessel from the Levant, at Stangate Creek; he was ill of a disease not in the smallest degree suspected. I do not know the precise nature of it; he could get no medical attendance, because none of the neighbouring practitioners would put themselves in contact with him, and place themselves under the necessity of performing quarantine, and deprive themselves of the power of visiting their other patients. He was obliged to remain until the expiration of the quarantine performed by the ship, and a few days after the release from quarantine he died; and his death was attributed to his being obliged to remain in that situation without the comforts and necessaries for a sick man, and without medical aid; his name I understand to have been Moncrief, and that he was the brother of Sir Henry Moncrief. No blame is attributable any where for this accident. It is the system alone which is to blame.

Do you consider the plague of 1665 to have been the Levant plague?—Most certainly not.

In the case you mention, of the arrival of Mr. Moncrief, it was absolutely acknowledged not to be a plague case?—I have stated it as I heard it mentioned by the merchants and the secretary of the Levant company; they told me that it was not a plague case, nor even suspected.

Explain what you mean by a contagious disease, as distinguished from an epidemic?—By a contagious disease I understand a disease capable of being communicated from person to person, by contact or contiguity.

Define an epidemic disease?—An epidemic disease I understand to be a disease produced by such causes as are capable of operating simultaneously upon any given portion, or the whole of a community.

What is your definition of an endemic disease?—It is a disease peculiar to a country.

May not epidemic diseases, under certain circumstances, become contagious?—Certainly not.

You say in your work, that your servant who visited the hospital with you was free from the plague?—My servant ran away the first day, whilst I was in the act of setting out to go to the hospital; I had an interpreter with me, who did not leave it, who administered the medicines to the patients.

You say likewise, that your servant was seized with horror when you were first taken ill?—He was obliged to do his duty by my orders, but still the fear of contagion evidently came back upon him frequently: in fact, it had such effect upon him that he was reading his Greek Testament aloud constantly, and going into the churches whenever he went out with me.

You also state, that the plague is capable of being cured in the portion of four cases out of five, by particular treatment?—That was my opinion.

After you were seized with the plague, you say this, "I was now in a situation completely embarrassing, seized with a malady in nine cases out of ten fatal?"—Allow me to observe, that there is no inconsistency there; I suppose scientific treatment in the one case, and no treatment or bad treatment in the other.

Did you operate upon yourself?—Yes, I did.

And produced a cure?—Yes.

One of your definitions of contagious diseases is, that they can only affect the same person once?—Yes, of contagious general diseases.

You allow the small-pox to be a contagious disease?—Yes.

Have you never heard of persons being affected with the small-pox more than once?—I have, but I never believed it, because I saw no proof that ought to satisfy a scientific inquirer, according to my opinion.

Then of course you do not suppose it can ever happen that the small-pox can affect the same person twice?—No, not as a general disease.

May not a contagious disease be at the same time an epidemic one, at particular seasons?—I conceive not; according to my definition they are incompatible.

You have been in Calcutta?—I have.

Do you recollect that there is a certain season of the year in which the small-pox generally breaks out with great violence?—I have heard so.

And that some months afterwards it ceases?—That I am not acquainted with.

You

You know it breaks out with great violence at particular seasons?—I am not much acquainted with the state of the small-pox in the East Indies.

Charles McLean,
M. D.

(15 March.)

Can you define the plague as distinct from any other fever, by its symptoms?—As must necessarily happen of a disease produced by causes of such diffusive influence, and capable of being so variously modified, its phænomena embrace almost all the symptoms which the living body is capable of exhibiting. But few of these however can occur at once in the same person: and there are none, which can be considered pathognomonic. Most truly therefore, has this disease been called Proteiform. This inference, from the nature of things, is confirmed by facts and observations. “It is as various,” says Fra Louigi di Pavia, who attended a plague hospital thirty years, “as the complexions and constitutions of those unfortunate persons whom it attacks;” and if he had not believed in contagion, but had been aware of the proper causes, he would have added, “and as the modifications, proportions and combinations of the causes operating.” In general it begins like other forms of fever, with a cold, succeeded by a hot fit; and the fever for the most part, partakes of what have been called in the schools The Nervous (typhus) and the Putrid. The expression of the countenance, and the appearance of the eyes, and of the tongue, are the least variable of all the phænomena. “The surest symptoms of the plague,” says Fra Louigi, “are the eyes dusky and turbid, fixed and sparkling; the tongue forked, of a whitish colour, inclining to yellow, with the extremity red, which branches out in a number of small ramifications exceedingly inflamed.” In the pest house at Constantinople, I observed that the appearance of the countenance is peculiar. It more nearly resembles the desultory and wandering look, which takes place in the typhus of Batavia, and in the jungle fevers of other parts of the East Indies, than the fatuitous and fixed stare, which I have met with in the yellow fever of the west. The skin and muscles of the face exhibit a tremulous appearance, which, with a certain fierceness of the eyes, and sometimes an involuntary motion of one of the eyelids, as in winking, gives a peculiar expression of countenance; the whole constituting rather a ludicrous wildness of aspect, increased by the efforts of the patient, as if conscious of the insubordination of his features to preserve their composure. Fra Louigi remarks, that the eye of the side on which an eruption begins, becomes smaller than the other; and that in proportion as the eyes turn clearer, and the vision more perfect, the hopes of recovering are stronger. In the Pest hospital, I observed the appearance of the tongue to be very various; “sometimes blackish, sometimes brown, sometimes quite white, and now and then of a flesh red; always, in severe cases, dry and hard, and most commonly covered with a thick crust, generally corresponding with the colour of the organ for the time being. I have also seen it of a glossy grey, resembling the first formation of icicles upon water; and this state, *cæteris paribus*, appeared to promise the most favourable termination. My own tongue, notwithstanding that all the other symptoms of consequence were removed before the twelfth day of the disease, continued of a darkish brown colour, dry, and with a disagreeable bitter taste, especially about the root, till the eighteenth day.” The affections of the circulating system, and of the brain and nerves are extremely various, both in respect to their degrees and to the phænomena by which they are indicated. The pulse varies both in strength and velocity in a remarkable degree. The affections of the brain in the earlier and milder stages, are indicated by a rapid and unconnected succession of ideas, a hurried speech, a tremulous and unsteady walk, and a distracted look; the higher degrees are accompanied by delirium, anxiety, languor and melancholy, as well as great muscular debility generally prevail throughout. There is sometimes, at the commencement, a considerable constipation: but *diarrhæa* and *hæmorrhage* indicating a dissolution of the texture of the blood, are also in its progress not unfrequent symptoms, when severe denoting much danger. In the Levant, the plague is usually divided into six kinds. The true, or mother plague, in which the larger glands are swelled; all other tumors are called Carbone, and are divided into five classes, according to the degree of danger which they denote. The disease is to be distinguished by the aggregate of its symptoms.

You have been in Constantinople?—I have.

You know the suburb Pera?—Yes.

That is generally inhabited by Europeans?—By Greeks, and the better sort of Armenians also, and by Turks.

You are aware the plague makes much less ravage in that than in other districts?—I am not aware of that; I am aware that it makes more ravage near the district Tophana.

Charles McLean,
M. D.

(15 March.)

You are aware of the methods by which the Frank merchants at Smyrna usually endeavour to avoid the plague?—Perfectly; by shutting themselves up in their houses.

Are you aware that there are many instances of that precaution being found fruitless, and not to prevent the plague?—I understand it is sometimes fruitless, but that it is also supposed to tend to prevent it; and I believe, with truth, not by guarding against contagion in my opinion, but the vicissitudes of the atmosphere.

In what manner do you account for an epidemic disorder being prevented, by simply shutting a house in an infectious place?—I have, in a paper which I presented to the Committee, entered at large into the explanation of those circumstances. I understand that at Malta, where those precautions were taken, they were generally successful; but that at Gibraltar, where the same precautions were taken, they were generally unsuccessful.

Are you acquainted with the state of Smyrna?—No; according to my ideas of the subject, the benefit to be derived from shutting up must entirely depend upon the air in which the house is situated, and the other conveniences enjoyed, and its degree of elevation from the ground. On those circumstances principally, and upon shutting the windows at the most dangerous periods of the day, so as not to allow a thorough draft of air during the pestilential season in the town, depends the prevention not of contagion but of the entrance of the pestilential blasts which cause the malady. English sailors are commonly exempt from the disease, and less liable to it than others.

You say the sailors are less liable; are they not exposed to those blasts?—Yes, when they are ashore; but their constitutions are better able to bear it, and they sleep in better air on shipboard.

Did you ever hear of inoculation for the plague?—I have.

With what success?—I have heard of a gentleman inoculating himself three times and not taking the disease the two first times; but the third time being seized with the malady, by a coincidence, a result as I conceive which would have equally happened whether he had been inoculated or not: the case I allude to particularly, is the case of Dr. White, who died in Egypt.

Have you heard of any patient being inoculated again and again for the small-pox and not taking it, and afterwards taking it by infection?—I do not know of any facts I can speak to.

Do you know the opinion of Dr. White on the subject of the plague?—His opinion was, that it was not contagious; he attended several patients ill of what he supposed to be the plague, but one in particular, from whom he took matter, and rubbed himself without any injurious effect being produced; and this statement is certified by the chief agent of transports and captains of vessels on the spot.

Do you use the words contagious and infectious as synonymous?—I am not aware that I have used the word infection at all; if I have, it is synonymously, understanding that to be the way in which it is generally employed.

Have you understood the Americans are going to abolish their quarantine laws?—I understand the people of Baltimore have either partially or wholly abolished it; but I have no other authority than the newspapers.

Do you consider the establishment of our own quarantine laws of any use?—Not of the smallest use; if it be true that there never has arrived at any one period of time any one person from the Levant, or any other place, actually labouring under the plague; and if it be true, according to the advocates for contagion, that goods, wares and merchandize can retain infection for seven, fourteen or twenty years, it must be apparent, that with respect to goods as well as with respect to persons, a quarantine of forty days can in such case be of no sort of use.

Who are the advocates that maintain that the infection could be retained for so many years?—The medical writers, upon whose works the quarantine laws were originally founded.

Are not the regulations of the Lazaretto system, adopted in Italy, founded upon the idea that the plague is contagious?—Certainly.

Are they found effectual for preventing infection?—By no means. In my work upon the subject I have stated what happened recently at the town of Noya, which was surrounded by lines of circumvallation, ditches, and cordons of troops, and every mode of restriction imposed upon the inhabitants; and the disease continued as it has done at other places subject to plague police, its usual course, and ended at the usual time.

Did

Did the circumstances that occurred at Noya begin in the Lazaretto?—I do not at this moment recollect the circumstance; but I have got an account by me, which can ascertain that point if it should be deemed of any consequence.

Charles M'Lean,
M. D.

(15 March.)

In the cases where the infection has been communicated, notwithstanding that system, have not the cases that have occurred usually occurred in the lazaretto?—No. In Malta, according to the evidence of the president of the college of physicians, who attended the lazaretto hospital for 15 years, no person employed as an expurgator of goods was ever affected during the whole of that period with the malady; nor in the plague of 1813 was any one of those persons affected; they enjoyed therefore a greater exemption from the disease than the community at large. This I have from the evidence of Dr. Caruhanha, proto-medico of the college, and Dr. Grieves, superintendent of quarantine.

Did you ever hear the plague had been at Marseilles since the great plague?—I have not heard of it; but I make no doubt it has been there partially.

How do you suppose the plague got into the lazaretto?—I am supposing people to have arrived there labouring under it from the Levant.

Not brought by goods?—No; I conclude they must have arrived with the disease upon them, produced by the air which they had left, or that of the ship, or the goods, or the lazaretto itself.

Supposing persons brought into the country, infected with the disorder, do you think the disorder would spread?—I have not the smallest apprehension of that; on the contrary, I should cheerfully expose myself to contact with all persons labouring under disease, or with bales of goods arriving from the Mediterranean, or any other quarter, in which plague or other epidemic diseases are supposed to prevail; assured that I could not, from mere contact, take the disease.

How do you account for one person coming infected to one place, being capable of giving it to others?—That is assuming the fact the Committee are inquiring into, and which I do not admit ever to have happened.

Have you ever known cases in which the plague has prevailed in a lazaretto, and not in the town or district where it was situated?—I think it was stated to have prevailed at Marseilles in the lazaretto and not in the town?

You have not seen that yourself?—No.

How do you account for its introduction into the lazaretto?—By persons coming with the disease upon them, or leaving a port at sea with it upon them, or coming from the air that occasioned it.

Do you mean to say, that other persons got it from the person who arrived?—No; I do not admit that ever to happen.

You do not state that of your own knowledge?—I know nothing of the lazarettos at Marseilles from my own knowledge, only those of Malta.

So that if in the lazaretto at Marseilles there had existed cases of the plague, you assume that individuals labouring under the complaint must have come into it with the complaint upon them?—It is very difficult to answer that question, because the plague may be confounded with so many other maladies; but confining it to the plague, I am not aware that such cases have occurred; that cases have occurred in which it is supposed to be the plague, and stated as such, and not spread, is certainly true.

The symptoms of plague are distinct?—No; they are so numerous, so various, and frequently so indistinct, that the disease may often be confounded with other maladies.

Do you know of any instance where the plague has been marked, where it has not spread?—It is not consistent with my own knowledge, but cases have occurred in the island of Cyprus, at the town of Larnica. A ship being wrecked upon that island, some of the crew being ill of the plague were sent to the town of Larnica, they were visited by the people, some of them died; but the disease was not produced the following year; the disease prevailed in the town of Larnica, and swept off at the rate of 20 or 30 a day.

At what time of the year was this?—In March I think, or April, as far as I recollect.

Are you aware, that in the towns of the East, the Turks suffer in a greater proportion than the Christian population?—I am aware that such has been represented, but I do not credit it, because I do not see the grounds of it; it has been assumed by Christian travellers, that the Turks must necessarily suffer more, since they do not

Charles McLean,
M. D.

(15 March.)

take precautions that the Christians do ; and they have stated the fact upon mere assumption ; what means they had of judging, I profess not to know ; I do not know that bills of mortality are kept by the Turks.

Had you an opportunity of judging which of them suffered most ?—It is matter of obvious fact, that the Turks do not desert their friends when seized with the disease, not feeling that dread of the malady which Christians do ; and it is admitted by the advocates of contagion, that dread operates more severely than what they call the true contagion itself ; it therefore must operate equally severely under the belief of contagion, whether it does or not exist. And it must operate more severely upon those who entertain that belief, as the Greeks and Armenians of the Levant do, than upon the Turks who do not entertain it. This also has been confirmed by facts ; and it is stated by various travellers, that the Turks recover in a much greater number from the plague than the Christians who are attacked with it.

Such being the belief of those who support the doctrine of contagion, how do you account for their uniformly and invariably representing the greatest mortality among the Turks, where there is no dread ?—I am not aware that it is so uniformly and invariably represented, but if it be, it is only the opinions of those travellers who are not enabled to judge of the circumstances ; for no traveller in the Levant can possibly be in a situation to know any thing at all of the matter, except what is represented to them by Christians believing in contagion, or by the superintendents of the plague establishments.

Those Christians being inhabitants of the country ?—Yes ; but those have different degrees of belief : the Greeks believe much more in contagion than the Armenians.

You have told us, that the plague is thought to be of six different kinds at Smyrna ?—So I understand it to be ; I do not state that from personal knowledge.

You have described the mother plague, did you describe the other five ?—I have not gone into the particulars ; I understand they are different only in degree ; I made the account as short as possible, but I can go into it more particularly if the Committee wish it.

Is there any particular symptom in the plague, by which you think it may with certainty be distinguished from any other fever ?—The symptom which seems to be the most regular, is, the peculiar appearance of the countenance, and the eyes and the tongue ; but that I do not conceive to be distinct from what those appearances are in the severer degrees of the ordinary forms of typhus and yellow fever in other countries.

Have you put much dependence upon the glandular affections, as a distinctive character of the plague ?—No.

Nor the carbuncles ?—They do not always occur ; but when they do, they are more distinctive marks of the disease, in my opinion, than the glandular swellings.

To what extent have you made trials of that method, by which you think the plague may in four cases out of five be cured ?—I have only had an opportunity of trying it in an efficient manner upon myself, not being able to try it accurately on the patients in the hospitals ; I was not able to apply the remedy at night, from the customs of the people.

Then your opinion of the validity of that method, is drawn from a single experiment ?—No ; my opinion was drawn from analogy in that case, and the other cases which were successfully treated in the pesthouse, as well as from the efficient manner in which I had, for many years, previously an opportunity of applying the doctrine in yellow fever, and the typhus of various countries : it is principally from analogy in other cases I draw my inference.

Have you ever known the typhus fever that which you could be sure of as the typhus fever, to show the symptoms of glandular affection in the same manner as the plague is seen to do ?—I have seen distinct buboes in the groin in the typhus.

In this country ?—Yes ; I have seen such a thing, but not often.

Did you ever see the carbuncles ?—No.

You attribute the origin of the belief of contagion in epidemic diseases, to the date of the Council of Trent ?—I consider that to have been the period at which it was first accredited and acted upon, by any public authority, with a view to effect the removal of that council to Bologna.

Are you quite certain it was the plague that prevailed ?—It was disputed by the Cardinals, whether it was the plague or scarlet fever. Fracastorius said, It was the true

true plague, and said he had come there to attend other disorders, but not to expose himself to the true plague.

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Do you imagine the Court of Rome could have availed itself of this argument, unless there had been a pre-existing opinion to that effect?—That there might have been a pre-existing opinion, I am not competent to say, I do not know that there was; I am sure there was none among the eminent physicians of antiquity. I am not aware that any statement of it is pretended to have been made, previous to the Decameron of Boccacio.

Do you imagine the disease prevailing in Florence in 1348, was the true plague?—I have no doubt of it. I have no reason to doubt it; I was going to explain with respect to the Decameron, that it is necessary to ascertain the precise date of its being printed, in order to appreciate the authenticity of the doctrines which it contains, as being those of the writer; or as being introduced by interpolation of editors or commentators. At any rate, it does not signify to the main question, at what time the doctrine of contagion originated, or by whom, and by how many it has been entertained, if its truth can be disproved.

You have stated, you do not believe the notion of the plague being contagious, is alluded to by the physicians of antiquity?—I have.

Do you not conceive the description given of the plague of Athens by Thucydides, is the description of a contagious disease?—No, I do not, so far as I am able to judge of his meaning by a comparison of the different interpretations of him; on the contrary he expressly declares, that he leaves it to others to enter into the cause of the malady, meaning, on his part, merely to state the manner of it. It would be strange that Thucydides, who was the cotemporary of Hippocrates, should have considered plague contagious, whilst the latter imputes it to the air.

Is it from actual observation, that you conclude that the Turks and Mahometans generally suffer less from the plague, or at least are less frequently affected with it than Christians?—No, it is not from actual observation, it is from the nature of things, and because there is no evidence to the contrary.

You have given the Committee your opinion, that the plague is not contagious, the Committee would be glad to know upon what ground you found that opinion?—Upon a great many circumstances. In the first place, the plague and all other epidemic diseases appear at certain periods, generally speaking, and disappear at other certain periods, different in different countries; they also cease generally at the time at which the greatest number of persons are affected, as happened in the plague of London in 1665, in the plague of Marseilles in 1720; and I believe in most other severe pestilences; which seems to me wholly incompatible with the existence of contagion. Also, because they are capable of affecting the same persons repeatedly, of which there is no proof that contagious general diseases are capable of doing.

You admit the small-pox to be contagious?—Yes.

Do you think there is no proof of the small-pox having affected any person more than once?—None whatever, further than assertion; if assertion is to be taken for scientific proof, then I admit there is proof in abundance.

If you should find hereafter well-attested proof that the small-pox had affected a person twice, you would then leave out of your definition of contagious diseases, that they never could affect the same persons twice?—As I conceive it impossible that nature should ever be so inconsistent with herself as to render a few persons capable of being affected repeatedly by a contagious disease, whilst the great majority of mankind are incapable of being so affected, I should in such case, distrust the evidence of my own eyes.

Have you ever heard of instances of several persons being bit by the same mad dog, and some having been affected with the disease that generally follows, called Hydrophobia, and others not?—I am not acquainted with the disease of hydrophobia, sufficiently to give an opinion upon it. I know it is a part of the science of medicine that is yet very obscure.

In the case of the small-pox, which is undoubtedly infectious, has not the state of the air a great influence in checking or promoting the contagion?—I am not aware that it has, it may have a great effect in preventing mortality no doubt.

Do you mean to say, that according to your own observation, the plague is less frequent among the Turks, than amongst the Christians in the East?—There are no data to go upon in forming an opinion; all we can do is to conjecture upon it. The Greeks, Armenians and other Christians in the East, have all pest-houses, the Turks have none; there are no bills of mortality, nor any means of obtaining accurately the

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relative number affected. My experience was not sufficiently long in the Levant to ascertain that point; but I saw or heard nothing to induce me to think the Turks are more frequently affected than the Christians, if so frequently.

Have you ever heard of a very destructive plague that prevailed at Moscow?—Yes.

At what time of the year was that?—I think it began or principally prevailed in July or August, and declined or ceased in November or December. There is a long statement of it by Drs. Samoilowitz and De Maertens; I do not recollect the particulars; but my impression was, that it began at the usual epidemic season in northern latitudes, and ceased at the usual time.

What do you mean by the term epidemic season?—That season in which epidemic diseases most usually occur in any country; the epidemic season I consider in this country to be from July or August to November or December.

You conceive the epidemic season to depend upon the state of the atmosphere?—Yes.

What would you call the epidemic season at Moscow?—It appears to be the same, or nearly the same as in this country, judging from the pestilence of 1771.

Do you believe that the state of the atmosphere at Moscow at that period, in the months of October and November, was less severe in point of cold than it ordinarily is at that place?—I have no data to go upon respecting that particular point.

What do you conceive to be the causes of epidemic diseases?—The epidemic constitution of the air; sudden or extreme vicissitudes of temperature; deficiency of nourishment and depression of the mind, I conceive to be the principal causes of epidemic diseases; and various other occasional causes.

What is the principal epidemic season at Constantinople and Smyrna?—They are very different; the earliest in the year is at Smyrna, it occurs from February and March to June or July; it is considered generally to terminate about the 24th of June. At Constantinople it commences in July or August, and terminates in November or December.

Do you know the time at Cairo?—Much about the time as at Smyrna; it seems to correspond with the rising and falling of the Nile.

Then at Constantinople the period is much the same as in England?—Yes; but I must observe, that they may be occasionally anticipated or postponed, according to those circumstances which produce the cause; if the epidemic state of the air be not intense, but other causes are operating, then the autumnal season is less distinguished for the severity or extent of the disease, over the other seasons of the year.

Having stated the causes that in your opinion led to the plague, what are the causes which operate to produce its cessation?—An alteration in the qualities of the atmosphere, together with the disappearance of the other causes, when these are also operating.

Is that alteration in the state of the atmosphere, a change from heat to cold or from cold to heat, or from both?—It does not appear that it is at all connected with the change from heat to cold, except in as far as sudden transitions are concerned, to illustrate my observation; they commence in England and other countries in hot weather, and terminate in cold; in Egypt and Syria they commence in cold weather and terminate in hot.

When you talk of cold weather in Egypt and Syria, do you mean cold weather as compared with the previous heat, or cold weather as marked by the state of the thermometer?—As compared with the ordinary heat, with the average heat of the year.

So that, if that be the case, the plague might prevail during an intense frost, provided that frost came on suddenly, just as well as it might in a much more moderate degree of cold; supposing in that case also a sudden variation of temperature?—That I could only speculate upon, not having any precise facts to go upon.

In your opinion would a violent frost put an end to the plague?—I do not conceive it necessarily would, unconnected with other circumstances.

Do you think that dryness and moisture, and not heat and cold, are most conducive to the plague?—The excess of either.

Did you ever hear of the plague in India?—I never did.

But there is a great change there in the dryness and moisture, and in the heat and cold?—Very likely; but I have not ascribed the plague to any of those circumstances alone.

Have

Have you ever known or heard of contagion in the East Indies?—I have not among the natives.

Do you conceive the clothes sold out of the pest hospitals, would produce the plague?—Undoubtedly they would, if the plague were contagious. They could not fail to produce it; but it is customary for the relations of those who die of the plague in Turkey, to wear the clothes of the deceased, or to sell them in the public bazaar or market place; they are in constant circulation. I used to walk into the city of Constantinople every day, sometimes even after I had the disease, and go through the thickest of the people along with my interpreter, visiting the coffee-houses and other frequented places. They knew we were making experiments in the plague hospital, and none of the Mahometans ever avoided us on that account, nor was the disease by that means propagated. The purveyor and other agents of the hospital, walked every day to the open market to buy their supply of victuals for the hospital; they came openly among the people without any precaution.

These were Greeks?—Yes; but they went among the Mahometans.

Do you not conceive that any peculiar change in the atmosphere would put an end to any epidemic disorder, supposing it to be contagious?—I do not admit that it would, whilst the contagion had subjects to operate upon, that had not become unsusceptible.

You have stated, that in your opinion epidemic diseases cannot become contagious, do you consider the influenza an epidemic disease?—Most certainly.

You are aware of course of the consequences of influenza in the island of St. Kilda?—I cannot say that I am.

Thomas Foster, M. D. called in; and Examined.

YOU practise as a physician?—I do.

Have you any information you can give the Committee, upon the subject of the contagion of the plague?—I have no personal observations to make upon the Plague.

Have you been in countries where the plague has prevailed?—No.

Have you read on the subject of the plague?—I have.

Have you formed an opinion?—Yes.

Favour the Committee with your opinion on the subject of the plague?—I conceive under certain circumstances it is contagious; for instance, wherever there be close confinement in a chamber in which atmospheric air is not freely admitted, but if atmospheric air be freely admitted into the chamber of the patient, the attendant will be, generally speaking, free from contagion.

Do you consider that we have had cases of the Levant plague in England?—Certainly not, in my memory.

From your reading or inquiries, do you conceive that the plague of 1665 was the Levant plague?—I should be inclined to think not.

What do you suppose to be the specific marks of the plague, generally speaking?—I should think perhaps the bubo, and that kind of eruptive affections.

And the carbuncle?—Yes; as constituting distinctions from the generality of pestilential diseases.

Did you never know the typhus fever marked with glandular affections?—I have known cases of typhus fever in which glandular affections have occurred; but it would be difficult to connect them as cause and effects with the fever, as they might have arisen from cotemporary causes.

Have you made any inquiry as to the existence of the plague in England, or in quarantine places?—Very frequently.

What has been the result?—That I could never find any evidence of a plague case existing any where here.

Do you consider the small-pox a contagious disease?—Unquestionably.

Do you consider the plague to be of the same class of diseases with the small-pox?—I consider the plague to be attended with a degree of eruption occasionally. I have been induced in a great measure to lay aside the nosological distinctions of diseases, from the observations I have repeatedly made, that there exist too many intermediate diseases, and too many modifications of all to render such nosological arrangements practically useful.

Is it a mark of contagious diseases that they can only attack persons once?—I believe contagious diseases can attack persons more than once.

Have you ever heard of or seen instances of the small-pox affecting persons more than once?—I was personally acquainted with a man who had it three times.

Have you heard frequent instances of a man having it twice?—I have heard very frequent instances of it; but very few were well authenticated.

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Have you known any instances of it well authenticated?—Two or three besides the one I alluded to.

Did the person who had it three times die?—He died (I believe of apoplexy) about three months after the last attack.

You do not consider that a circumstance decisive against its being contagious, that the disease should affect a patient several times?—Not absolutely decisive against the contagious nature of the disease.

Is contagion a modern term, or is it mentioned in ancient writers?—I do not recollect the word contagion occurring in very ancient writers.

Is it not in Hippocrates?—I do not think it.

What do you call infection and contagion?—I consider contagious diseases such as are capable of being communicated by contact and inoculation; but infectious diseases are those that arise from the infecting state of the atmosphere.

You do not think that a person could catch an infectious disorder from another?—I consider that some diseases, which are infectious, may be afterwards communicated by contact.

Do you think a person labouring under the plague, coming near a person in perfect health, could communicate to him the same specific disease, merely by touching him?—With respect to coming near, I consider not, if the air around him was good atmospheric air, but by contact I am not certain; I speak with caution.

Do you think the plague could be communicated by inoculation?—That fact I have no knowledge of.

You would consider it a contagious disease if a person came into a room in perfect health, and was afterwards seized with the disease?—I should think the conjunction of the two causes too marked to be overlooked.

You have said, you place little dependence upon the common nosological distinctions?—Very little.

By what signs do you discover one fever from another?—Fever includes a very large class of disorders; some are continuous.

Do you distinguish small-pox from the measles?—Yes; by the nature of the eruptions.

You say, small-pox and measles are continuous?—They are continuous while measles last.

How do you distinguish the small-pox from the measles?—By the nature of the eruptions.

What do you consider as the distinctive character of the plague?—The nature of the glandular affections and the eruptions.

You consider that epidemic or infectious diseases may become contagious?—Some of them.

Are those signs by which you know the small-pox from the measles, and the plague from both, nosological distinctions of your own?—Of my own, in common with other physicians, in those three cases.

Did you not say, you placed very little reliance on those distinctions?—I mean to say, that during a time of pestilence the fever which attacks one person may vary in its symptoms from that which attacks another, in consequence of constitutional predisposition; further, constitutions being almost infinitely variable, the variety of the fevers becomes endless, and the symptoms apparently confused; but yet there are decidedly marked cases, in which I would venture to give a name to a fever.

And you would say, in these cases both persons had the plague?—In certain cases.

Though the disorder in the two should vary considerably?—Yes.

You should then know the two disorders to be the same, with such a variety of symptoms?—I conceive the symptoms might vary so, as at first to puzzle the most experienced.

Then how could you pronounce that both these persons had the plague?—I could only do so if I discovered symptoms in common with the two.

Would those symptoms which they exhibited in common, be such as to make you pronounce the disease in general to be the same in both?—In the generality of cases.

Are those symptoms the symptoms which you would call the distinctive symptoms of that disease?—They are distinctive symptoms where they occur in a distinctive manner; I consider, from the peculiarities of the human constitution, the same disease becomes so various in its symptoms and character, as to be frequently mistaken.

Do you suppose the typhus fever for instance, in a change of the air, could ever be converted into the plague?—I have no direct evidence from my own observations of what

what I have seen of the change of air in the north of Europe, to expect any change of atmosphere here, which would convert typhus into plague.

Do you think that a person taking one contagious disorder, say the small-pox, from another, might take it with such a variety of constitution as that the disorder when it appeared in him should not be the small-pox but some other fever?—I never saw any thing that warrants such a conclusion in cases of the small-pox, which disease I consider to be most decided in its character of any of our eruptive diseases.

The small-pox was only taken for example; would you say the same of any other contagious fever?—Of the generality of continuous fevers, which can be communicated by contagion.

Would you say that of the typhus and measles?—No.

Would you say that of the typhus and scarlet fever?—I am not aware that a patient predisposed to scarlet fever would be susceptible of taking it.

Have you formed any opinion of our quarantine establishments, from the inquiries you have made respecting the plague?—I have considered the quarantine establishments only as they related to the medical question, in what manner the plague is capable of being communicated; and the result of my inquiries have been satisfactory to myself, that the free admission of atmospheric air into chambers was, in general, a preventive against the propagation of the disease.

Do you conceive that any care respecting ventilation could prevent a sound person from catching the small-pox by persons coming near him?—Not all persons.

You have stated, that in all your inquiries you have never ascertained that the plague has happened?—I have made inquiries in different parts of England and Wales, and even on the shores of France, and I could never find an instance.

Do you conceive there is a necessity for the quarantine laws, having that fact first established?—I am incapable of determining whether this fact of the non-occurrence of plague is to be referred to the active operation of quarantine, or whether we must not refer it to the incapability of the plague being propagated by the general and supposed means.

If the plague has not occurred in the ships arriving at quarantine stations, nor in the Lazaretto's, should you then conceive there was a necessity for those establishments?—I should think it would greatly diminish the necessity.

If it had not occurred for 50 or 100 years, what should you say?—I should be unwilling to deny the absolute necessity, but I should speak very confident on the other side.

Should you attribute our immunity to our distance from the plague country?—I should think the distance one reason; but the principal reason the difference of climate.

Then you would rather infer the plague has not existed in our atmosphere?—I should rather be inclined to suppose the plague has not existed in our atmosphere of late; but whether the atmosphere has not changed of late I do not know; it was the opinion of Sydenham that it did change.

Do you think that any man can have any idea what the change of the atmosphere is, that makes diseases more prevalent at one time than at others?—I made one experiment, which was in some degree satisfactory; the result was, it is not the temperature, nor pressure, nor dampness alone, nor the vicissitudes from one to the other of these states that seems to induce disease, but a circumstance I once noticed induced me to think, that the electricity of the atmosphere was principally concerned therein.

In places which have occasionally been visited by the plague, are you not aware that such places have sometimes enjoyed immunity from the plague, for a long continuance?—I am quite aware of that fact.

Then from the length of the immunity enjoyed by this country, you would not decisively conceive that we never could have it?—Not decisively; but I should say, that the probability varied inversely, as the distance of time from the last occurrence.

Might not that probability also exist in the nature of the precautions used during the time?—It might, if the history of such precautions could be traced; but it appears we have no decided account of such precautions.

Have you any reason to believe that the Levant plague has ever been in England?—There were some symptoms said to exist in the plague of London, which varied much from the general symptoms of English fevers, for instance, the buboes.

Do you not think it possible a ship with the plague on board, might arrive at one season, and at the same time the state of the atmosphere be such as not to spread, and at another time it might be such as to spread?—That is my own private opinion; but I consider the facts on which it is founded, not yet sufficiently matured.

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If the fact be ascertained, that the plague has never been found on board a ship arriving in this country, or in the Lazaretto, would not that be sufficient to decide the inutility of the quarantine laws?—It would be a very good reason.

Are you acquainted with any authentic account of the plague having been communicated by bale goods?—I have heard it mentioned, but I never heard it authenticated.

Do you think it may be communicated by them?—That depends upon the degree with which they are infected.

Do you suppose that one description of goods is more capable of receiving and retaining infection than others; is it not generally supposed that woollen and cotton goods are?—They are non-conductors of heat, and therefore may perhaps be less liable to emit effluvia readily.

Have you any other reason why they are more likely to receive and retain infection?—Not as to these articles.

But it is supposed that they are more capable of retaining infection?—It is; but I know of no facts to support it.

Supposing other bale goods are capable of receiving infection, how would you ventilate them?—I should conceive that the most difficult of all modes of preventing infection.

Then supposing that such bale goods are capable of receiving and retaining infection, and admitting the difficulty of ventilation in those instances, should you not conceive it would be a very hazardous experiment to remove all precautions with regard to the influx of those goods into England, coming from countries in which the plague prevailed?—I must answer that, by just stating the view I take of this particular branch of the subject, which is, that if bale goods be capable of receiving the infection in the Levant, so as to convey it all the way to London, the short time limited for quarantine would be insufficient to prevent the danger. I think Lucretius's account of the infectious nature of certain diseases worthy of being made a minute of; he thinks the cause of pestilential diseases consists in the infectious qualities of the air, which are capable of exciting the disease on predisposed constitutions; secondly, that those peculiar qualities of the air operate in some instances locally and continually in particular regions, of which he cites examples, and instances diseases which occurred to persons visiting those places; moreover, that unhealthy qualities of the air occur in all places casually, and excite prevailing epidemics and influenzas in particular seasons, which the predisposed soonest fall a prey to.

Mercurij, 17^o die Martij, 1819.

SIR JOHN JACKSON, BARONET,

In the Chair.

Dr. James Johnson called in; and Examined.

Dr.
James Johnson.

(17 March.)

HAVE you had an opportunity, by experience or reading, to form an opinion respecting the Plague, and the probability of its being attended with contagion?—I have not personally seen the plague; I have served in the Mediterranean, where I had opportunities of acquiring information.

State your opinion respecting its being contagious?—I have not the least doubt of its being contagious.

Do you consider it as contagious of things as well as persons?—I consider it contagious through the medium of contact, near approximation, or exhalation, and fomites.

In what way communicable?—By actual contact, by near approximation, as by the breath, secretions, exhalations, &c. its activity being dependent on the particular state of the atmosphere.

Then you consider that the articles of cargo can be infected, and thereby become likely to communicate the plague to persons?—I consider the articles of cargo not so likely as clothes; I consider packages not to be near so likely to transmit or bring contagion, as the articles of dirty apparel.

But still you consider, that the plague infection can be communicated by articles of cargo to persons?—It is not very probable, though possible.

Do you mean clothes that have been worn?—Clothes that have been worn.

Then

Then you rather exempt goods?—I think they are not near so likely; because when they are packed and manufactured, they are not likely to have people labouring under the plague about them; and consequently the probability is not near so great.

But still it is probable?—It is possible that some particular goods might by accident bring the contagion.

Specify what goods?—I should think cottons more likely.

Do you suppose silk and wool?—Silk and wool.

Corn do you suppose?—No, I should think not so likely; because I know that in woollen clothes the fomites of other contagions is more generally retained than in any other substances.

Supposing one of the most likely articles to communicate the plague to be infected, such as wool, silk or cotton; do you consider it as easy to purify those articles?—Nothing more, I think, is necessary than ventilation; free ventilation, and opening them out to the action of the sun and air.

What do you think of the interior of bales?—I think it hardly necessary to expose all the interior parts, but that it is going far enough to expose individual bales and packages to the free action of the atmospheric air and the sun.

Do you consider that goods infected with the plague are often purified, and divested of infection?—I think it is extremely seldom that contagion is brought in goods; but that the purification is more frequently a process of safe precaution than of actual dispersion of the contagion.

Should you consider that, as far as respects goods and cargoes, the quarantine establishment may be considered as useless?—No; but I think the laws are too rigid; the time is too long, and probably the process too complicated; but I think the contagious matter is capable of being transported to this country by goods or clothes, and therefore some precaution should be taken, and a certain quarantine necessary.

Do you mean precaution with respect to goods?—Yes; I should think that the free exposure of packages, even if not open, would be sufficient.

What do you mean by free exposure; because if they are not opened, how are they capable of it?—I will put an instance: a box of opium may come from Turkey; I do not see the necessity of opening that, and exposing each cake of the contents. I take that as a single article.

But confine yourself to silk and cotton?—To bale goods it would be judicious to expose them as freely as possible.

Without the universal exposure of the package, should you think it safe, supposing it had been infected?—If it were supposed to be infected, then very free ventilation and exposure should be used; but I think it is rather within the range of possibility than probability, that, under ordinary circumstances, the contagion should be brought to this country by articles of cargo.

Is it not as likely that the seat of infection should be in the interior part, as in the outside?—No, I think not; because the exterior covering may pass through a great many places, and be exposed to various sources of infection, where the interior could not.

Exposed to the counteracting cause?—Certainly.

If that is the case, the outside being prior and at all times exposed to the air, common ventilation would prevent infection on the outside?—It most probably would.

The same cause you adopt for purification would entirely operate as a preventive?—Yes; but suppose infected persons on board, where there are packages; the exterior of these packages, during the time the cargo was lading or conveyed to this country, must be more exposed to contagious matters, and these being placed in the interior parts of the ship, the infection might not be sufficiently dissipated, without a free exposure to the air and sun afterwards.

Have you ever known or heard of a plague case on board ships arriving at lazarettos in Great Britain?—No.

How do you suppose a bale of silk, or woollen, or cotton, would become infected by the plague, in the interior part of it?—Only by those who are employed in packing it having contagion about their clothes, or by being convalescent of the plague; or from the interior component part of the package having passed through dwellings where contagion might have subsisted.

Then, according to the circumstances, is it not more likely that the infection should remain in the interior part of a bale than the outside, considering the outside as exposed generally or often to ventilation?—In respect to the interior part of a package,

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package, I know of no other way in which it might bring contagion, but as I have said; I think it not very probable it would do it that way; these are the *possible* ways in which it might be brought, still considering that it is very improbable: these can only be matters of opinion.

Is it not the opinion of some medical men, that the pestiferous matter does acquire more activity in fomites, than when it comes immediately from the body?—It is the opinion of many that it acquires a concentration of virulence by confinement; but I cannot speak of my own knowledge.

Should you consider that the fact of there not having occurred a plague case at any lazaretto for 50 or 100 years, should be sufficient to inspire confidence to contemplate the doing away quarantine establishments?—No, I do not, because I know that the contagion of plague is very considerably under atmospheric influence; and consequently, that a very long period may occur in which that peculiar constitution of the air is absent which gives activity to the matter of contagion.

Should you not, in that case, consider 100 years sufficient to give a recurrence of all the possible cycles of combination?—Yes, certainly; in all probability such constitution of the air would return in that period; but then the means now taken in quarantine might prevent the introduction of the contagion at such particular junctures.

Considering that no personal case of plague has occurred in the lazarettos, for many years, do you consider these establishments to have been the cause why the plague has not appeared in Great Britain?—It is a very difficult thing to answer that question. I think the great probability is, that no infection, or very little, was brought; and if it was brought, it may have been in so slight a degree, as to have been dissipated by the means used; the probability is, that it seldom or ever reaches this country. I have not an intimate knowledge of the means used in quarantine; but I suppose they are exposure to the air, and such other means as common prudence would dictate.

As you conceive the infection, supposed to be introduced in the bales of goods, is so introduced by the persons packing; is it not your opinion that the internal part is more likely to have infection than the outside?—If any of the interior part comes within the range of infection, during its passage or manufacture, it would certainly be more liable to retain it in the interior than in any exterior part of the package.

From all the circumstances, do you not think the internal part more likely to be infected than the external part?—I rather think not.

Do you consider the atmosphere to have any operation on infection in packages?—No.

I mean the atmosphere where the plague exists?—No, not the general atmosphere; the atmosphere of an infected room is a different thing; but the general atmosphere cannot possibly infect goods.

Then the infection produced by goods, must be personal handling?—By coming within the range of exhalation from infected matter. If an infected bed is in the house, and if a bale of goods was laid on a bed where contagion existed, it might be infected. The local atmosphere of a house or room might be impregnated by the effluvia of an infected bed or person, and that might communicate infection, but not the general atmosphere of the town.

Then you consider the general atmosphere to have no concern in the communication of infection?—Not in the *generation* of it; but in increasing its activity, or lessening its force.

Have you any particular circumstances to adduce as proof, that the plague is contagious or infectious?—I have; *first*, the authority of those who have written without bias on the subject; for instance Russel, and most of those who have seen it. *Secondly*, its being an *eruptive* disease is in favour of its being contagious; because we know that all eruptive diseases arise from specific contagions, or poisons as they are called; buboes and carbuncles are as commonly seen in the plague, as pustules in the small-pox.

Do buboes and carbuncles come under the description of eruptions?—Yes; the same as that of scarletina, or pustules in the small-pox.

Is typhus?—Typhus is not an eruptive disease.

Then you mean those disorders that medical men call Exanthemata?—Yes.

You have been a considerable time in various parts of India?—Yes.

Do you consider the malignant fevers, incident to Trincomalee, Batavia, and Diamond Harbour, to be a class analogous to the plague, as it exists in Turkey, Egypt,

Egypt, and in the African states?—No; I consider them to be totally different in their nature and causes.

Do you believe that these violent epidemics in India, depend for their origin upon the miasmata exhaling from the marshy soils of these regions; or are they communicated by *contagion* from the morbid to the sound bodies of men?—They are dependent principally upon the miasmata, which miasmata are influenced by the state of the atmosphere, and the diseases are not in their own nature contagious; but, under particular states, as from accumulation of filth and want of ventilation, they do occasionally assume a contagious character.

Do you believe the epidemic distempers and dysenteries of particular climates are contagious, under any circumstances?—I never knew an instance of simple dysentery being contagious; but epidemic fevers may sometimes become so. I consider that *all fevers*, whether originally contagious or not, may become so by the patients being too much crowded, by want of cleanliness or want of ventilation.

Have you experience of West India epidemics?—Yes.

Do you believe them to be contagious?—I believe the remittent and what are called Yellow fevers, more properly called Endemic fevers, are not contagious.

Have you had experience of the fevers that prevailed at Malta and Gibraltar?—I was at Gibraltar in 1800, but the fever was not epidemic then; there were sporadic cases, which I considered as of local origin; they were produced by causes generated in the surface of the rock, and atmospheric causes, not imported.

Define what is meant by the term sporadic?—Wandering cases, not generally epidemic; a case happening here and there in a family.

Do you believe the plague to be a contagious disease communicable by the effluvia of diseased bodies being applied to sound persons, independent of local circumstances?—Yes, I do, even under those circumstances, independent of any atmospherical or adventitious causes.

What are the means and circumstances most favourable to the diffusion of miasmata?—Heat and moisture.

May not epidemic diseases, under certain circumstances, become contagious?—They may; that is proved by the epidemic fevers of this country at this moment, which are produced in many instances by atmospheric and terrestrial influence at first, but propagated afterwards by contagion. I consider the exhalations of the earth as often combining with certain states of the air to produce epidemic fevers.

Take the converse; do you suppose that any contagious disorder could arise spontaneously?—No; I believe that what may be called the eruptive contagions, as small-pox, measles or plague, cannot arise spontaneously; they must spring from their own specific poisons diffused in the air, or directly applied to the body in some shape or other.

Do you admit the benefit or necessity of quarantine?—I should think it was necessary.

Do you not think the present laws of quarantine might be safely modified with regard to persons, without reference to cargo or goods?—I think that people arriving in health from suspected countries, might be admitted after a few days (say eight or ten days) to communicate with England, with the community at large; the length of the voyage materially bears on the question.

I ask you, whether you have had any personal experience of the plague?—No.

Do you know what the rules of quarantine are in this country?—I am not minutely acquainted with them; I understand that the time is sometimes 40 days in duration, and that the goods and clothes are ventilated or washed. I do not know minutely the laws of quarantine.

You do not know, then, that different periods of quarantine are assigned to vessels coming from different parts with different bills of health?—Yes, I always understood that there was a modification, but that few were below 40 days.

Are you aware that goods are classed according to the supposed power they have of conveying infection?—No.

In short, you are not acquainted with the regulations at all?—I am not.

So that you cannot say whether they are more rigid than necessary, or not?—I only state what I think would be quite long enough time for exposure to the air on the coast of England, before there was a communication with the people at large.

You have stated, that you have had no acquaintance in your own practice with the plague; therefore, the opinion you have delivered, with respect to its being infectious in the manner you have described it, is entirely derived from the knowledge

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of others?—Entirely from the knowledge of others, and reflection on their testimonies.

You have never, in the course of your experience, met with any case which impressed you with a belief that infection had been so communicated?—I never met with a case of the plague. I never met with a case where the peculiar symptoms of the plague were present.

When was you in the Mediterranean?—In 1800; I resided at Gibraltar hospital five months in the year 1800.

That was previous to the plague at Malta?—Previous to the plague at Malta.

I would ask you to explain what you mean by spontaneous production?—A fever, for instance, may arise without any visible cause.

As you consider the plague cannot be produced by spontaneous production, what is your opinion as to the case of the first person who takes the plague?—From latent contagious matter, dormant during a certain period of the year, and till a certain temperature or constitution of the air, or other adventitious circumstance in the person, gives it activity.

Then you suppose that the annual revival of plague is caused by latent or dormant infection?—Yes, called into activity chiefly by atmospheric influence.

Do you conceive that a certain quality in the air is necessary to bring forth the latent contagion; do you consider that, in the great plague in the reign of Edw. 3d, which spread over country after country, and carried off three-fourths of the inhabitants of Europe, the climates shifted; if from the year 1570 to 1665, there was a perpetual recurrence of plague in England, do you consider it probable that the same quality of the air could have been over England during a century?—With respect to the first question, the disease was probably produced by an epidemic influence, which will occasionally travel round the whole globe; for instance, in 1802, there was an influenza over most of the world. There was a fever in India a few years ago, which travelled nearly 1,000 miles, gradually extending itself in the direction of the monsoon, from near Cape Cormorin to the banks of the Carvery, and sweeping off 106,000 people. This took a considerable time to travel from one part to another; but went in the direction of the monsoon, affecting one district after another. That I consider as an epidemic influence which I cannot account for, excepting by peculiar states of earth and air; it was not contagious from individual to individual, but something in the air, which produced a general epidemic fever from south to north. I think it was some epidemic influence of this kind that spread over Europe; but from the time it happened, the descriptions are not minute; I hardly consider it the plague of the present day.

Do you consider that climates change?—I do; I think there are periodical changes, irregular in their returns, but bringing a constitution somewhat similar to former periods. This was the opinion of Sydenham, and is entertained by many at this moment.

Do you consider these changes as productive of disorders?—Certainly; and I think there are scarcely two epidemics precisely alike in their nature.

Do you consider the plague of 1665 to have been the regular true Levant plague?—I should think it was, and particularly from the eruption of buboes, which is the only criterion; the febrile phenomena in plague and other fevers, may be similar; the eruptions are the only sure distinctions.

Did you ever know buboes and carbuncles to appear in cases of typhus fever?—Glands suppurate sometimes, but very rarely; they are only exceptions to general rules; whereas, in true plague, the eruption of buboes or carbuncles is nearly as common as pustules in the small-pox.

Does every body who has the plague, also have it attended with carbuncles or buboes?—Not invariably; but perhaps 95 out of 100 have eruptions of one kind or other, unless the patients die in the first stage of the disease, previously to the eruption, (which is I think a sanative effort of nature,) or where nature is not ultimately able to bring out the eruption, even in protracted cases.

It appears that the plague was, at least, frequently recurrent in England for the greater part of a century, previous to 1665; in the year 1608 it is mentioned by a familiar writer, to be so prevalent, that houses were marked with a cross, and the words *miserere mihi* written on them to prevent persons from entering them; he particularly mentions the plague *spots*; would not that be a proof of the similarity of the plague

plague to the Levant plague?—It is a difficult thing to give a decided answer; where it is mentioned that they had the *tokens*, these were probably buboes or carbuncles; with respect to the *spots*, there is some difficulty in making up one's mind as to what they meant, they might mean petechi.

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Veneris, 19^o die Martij, 1819

SIR JOHN JACKSON, BARONET,

In the Chair.

Dr. William Gladstone called in; and Examined.

YOU are a practitioner in medicine?—Surgeon to the Naval Asylum at Greenwich. Are you acquainted with the disease termed Plague in the Levant, and the contagion ascribed to it; and what is your opinion thereof?—I was at Constantinople in 1806 and 1807; and from having been then surgeon of His Majesty's ship the *Endymion* I there saw some diseases of the plague, and a great variety of Asiatic fevers, highly infectious.

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Was the plague at the time raging?—No; there is at all times more or less plague there.

At what time of the year?—It was in December, January, February and March, prior to the forcing of the Dardanelles.

Will you describe to the Committee the characteristics of the plague?—It is a disease attended by sudden prostration of strength and spirits, great apprehension, and many symptoms of a malignant type. From the little apprehension the Greek physicians I saw have to come in contact with the plague, I was led to feel the pulse of their patients, which I did with considerable apprehension. I do not consider the plague more contagious from contact than through the medium of the atmosphere.

What was the consequence?—I felt no bad consequences.

How many plague patients do you suppose you felt the pulses of?—I saw three, and took opportunities of visiting them several times.

How was their pulse?—Very quick and full, frequently alternating, indicating great arterial disturbance: they were stout men, slaves belonging to the arsenal.

Had they buboes or carbuncles on their bodies?—One had an enlargement in the *axilla*.

A bubo?—Yes; and two of them died of the plague I was afterwards informed.

From what you have seen of the plague with your own eyes, do you consider it as contagious?—I consider it as highly infectious. My opinion is that it is equally so through the medium of the diseased atmosphere of a sick chamber, as by simple contact, by feeling the pulse.

What do you suppose is the cause of the plague at Constantinople?—Diseased constitution of the atmosphere and other peculiar causes, such as effluvia and soil, which produce endemic diseases all over the globe; from the same causes as we have epidemic diseases in England, and from the circumstance of that city standing upon hills. Many of the houses are built on ground sloping to the south-west, consequently liable to the whole action of the south-west sun; all are badly ventilated. The streets are very narrow, and they do not I believe possess that grand source of health, common sewers.

Are you acquainted with the suburb of Pera?—Yes.

That suburb is chiefly inhabited by Europeans?—Chiefly by Europeans.

Is it true that there is generally less plague in that district than in any other?—Perfectly true.

To what do you ascribe that?—To the houses not being so close, or the streets so narrow.

Is there increased cleanliness in that district?—More I think in Pera than Constantinople.

What do you mean by infection?—Disease produced by a contagious state of the atmosphere. An epidemic state of the atmosphere produced by various causes; effluvia, virous effluvia, or by contact with a particular virus.

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Have you ever heard of the plague being in Great Britain or Ireland?—Yes; both, during the disease of 1665, in Charles 2d's time. There is an order in council by the honorable Privy Council, present the Lord Chamberlain, the Earl of Bath, Mr. Treasurer, Mr. Vice Chamberlain and Mr. Secretary Morris, ordering the College of Physicians to suggest measures, and give directions to prevent the spreading the infection of the plague.

Do you consider that was the real Levant plague?—No.

Why?—At that period, as far as I have been able to trace from a variety of old authors, there was scarcely such a thing as a common sewer. The privies were accumulated under every house, probably not emptied for years; and an order was given to empty them once a month. That order originated, I believe, in the college of physicians after the spreading of the plague.

As you do not consider that to have been what is properly termed the Levant plague, to what do you ascribe the sickness in 1665?—To the narrowness of the streets, accumulation of filth, and want of ventilation; and probably a diseased constitution of the atmosphere at that period.

Then you consider it was not the Levant plague; that it was not imported, but that it originated in England?—Yes; I believe that it originated in England.

Do you found your idea of its not being the Levant plague, from any historical description, or nosological character of the disease?—I have not been able to trace any decided fact of its importation; a circumstance of so much importance and general interest, if true, would I think have been marked by every medical writer and historian of the time. I look upon the narrowness of the streets, the filth of the city, the want of common sewers, and the state of the atmosphere at that period, to have been the causes, but particularly the want of common sewers.

Was it attended with buboes and carbuncles?—Yes, as far as I am able to learn; in some cases, not generally.

Did you ever see cases of typhus attended with buboes?—Yes, in the first instance, in some inflammatory constitutions.

Frequently?—Not frequently.

Have you seen the carbuncles in typhus?—I have seen an enlargement in the groin; the carbuncle in general comes on the back between the shoulders.

Have you ever heard of the plague in Great Britain and Ireland since 1665?—There was a disease in Dublin something similar, but I have not any correct information as to it.

In what year?—I do not know exactly; I believe soon after the plague in London, but I am not sure.

Do you consider that our quarantine establishments, have kept the plague from being introduced into Great Britain or Ireland?—No, I do not; I cannot say they have. From having been frequently under quarantine restraint myself, I have made it my business to visit most of the lazarettos between Gibraltar and Constantinople; but the source of disease is more frequently seen among the Greek vessels that carry cargoes to Marseilles, of which there was a great many sailed soon after the blockade by the British squadron under Sir John Duckworth.

If plague infection was introduced into bales of goods in the Mediterranean, do you suppose that the present conveniences and opportunities at quarantine establishments in Great Britain, sufficient to purify them from the infection?—I consider the lazarettos, as far as I am able to learn, particularly inefficient in fitment for that purpose; I mean with respect to ventilation and ballast.

Do you consider that the Levant plague can exist in a British atmosphere?—I think that is very doubtful; but I think there is great encouragement to nurse disease, if any is imported into the lazarettos. There are some of the lazaretto ships, as I am given to understand, where the shingle ballast has not been shifted for many years; and in many instances fevers have been produced, and nursed from this case, even in our men of war; the men of war formerly used to be ballasted with shingles; on turning this ballast, it has produced fever in several of the ships; that I have seen myself, but it is well recorded.

What kind of fever?—The usual fever of the station they happened to be on, or the place they were at; not the plague. It is a well-known fact, established among maritime people, that the health of our fleets, our troops in transports, and seamen in merchant vessels, have all risen in proportion to the degree of perfection at which we have arrived in cleanliness and ventilation.

Have you in your inquiries, ever heard of a plague case having arrived at or been seen in any lazaretto in Great Britain?—Never.

Do

Do you not suppose, that if the infection of plague had been imported in any bales of goods from the Mediterranean, which were opened for the purpose of being ventilated at lazarettos, that if the plague had existed therein, and was contagious, those expurgators would become themselves infected with the plague?—Certainly.

Would the circumstance of plague not having been seen for so many years in Great Britain, or in lazarettos, give sufficient confidence for concluding that the plague cannot exist in a British atmosphere?—I should think it would not give sufficient confidence; it would create great alarm if known to exist.

You still suppose it might exist?—I think that is a doubtful point.

Is not plague in plague countries periodical in its beginning and end?—Yes.

What is the state of atmosphere that you conceive compatible and not compatible with the existence of plague?—I look upon it that in cold dry weather, the plague does not so frequently exist. In hot weather, after floods, when the rivers, such as the Nile, have overflowed, and left marshes and ponds, the action of the sun in summer on such marshes and moist ground always produces disease, and frequently in the Levant plague.

What sort of temperature do you consider necessary to the existence of plague?—In the cases of plague I saw at Constantinople, the thermometer stood about the freezing point, from 26 to 30; it was in the winter.

Was the plague prevalent at that state of temperature?—No it was not, but there were always some cases there.

There were cases even during that state of the year?—There are always some cases at Constantinople.

Was you at Constantinople, or any other part of the Levant, at any period of the year when the plague was raging violently?—No.

Do you happen to know what the state of the atmosphere is, in which it is proposed to act most violently?—I believe a high temperature, from 66 to 76, and upwards.

Is there any reason, when there is a hot moist air in this country, and the temperature rises to that point, that the plague should not exist in this country as well as any other?—I do not think the summer heat ever rises so high in England, as in those latitudes.

As it appears that it existed at Constantinople when the temperature was nearly at the freezing point, is there any reason why it should not exist in the same temperature in any other country?—In most other countries, and particularly in England, the houses are better ventilated, more cleanly and well drained.

Then do you mean to state, that the probability of its existing in England, depends on ventilation, and the cleanliness of the people of the country?—Not entirely, but in a great measure.

Do you consider the plague in its character, as infectious or contagious?—I consider it equally infectious through the medium of the atmosphere of a sick chamber, as from simple contact, having experienced it so far as having felt the arm of a patient under plague.

As you appear to consider the plague as connected with the state of the atmosphere, when the atmosphere is in that state that it admits of the existence of plague, do you then consider it an infectious disorder; I mean when the air is in that state as to produce a liability to infection by the touch?—I think it is impossible to come in contact with a plague patient, without inhaling the atmosphere of his chamber; and that we are more susceptible of infection by the membranes of respiration, than those of the fingers.

Do you confine it to the sick chamber, or to the general atmosphere?—The surrounding atmosphere of the chamber; the atmosphere of a sick chamber is more infectious than any other.

From any experience that you have had of the plague, have you seen instances of its being communicated any other way than by the touch?—Not in any way; I have never seen an instance of its being communicated.

You have stated, that you were present when there were cases of plague?—When there were plague patients at Constantinople, I made interest to view them, with the Arabian physicians.

State the circumstances of your visit?—I saw him approach the patient, and feel the pulse, without the least fear; and upon the second view, but with some apprehension of contagion, I was induced to do the same.

In what stage of the disease?—One patient had been ill a week, and was recovering;

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the others had been ill two or three days; I understood they died: the one of the week's illness, I understood to have recovered.

Were buboes and carbuncles on these?—One in the *axilla*.

Were these all the cases that came under your observation?—These were all the cases that came under my eye, that were decidedly plague; I saw a great variety of Asiatic fevers.

Do you attribute its not being communicable by contact, to the state of the air?—I consider that the plague is not more liable to be communicated by contact, than by inhaling the atmosphere in a sick room.

Then you believe it is equally communicable by both, either by contact or inhaling?—It is impossible to approach to contact without inhaling the atmosphere of a sick chamber.

What length of time was you at Constantinople?—I was there three or four months.

Do you consider these points of metaphysical temperature of air so useful and decisive in the investigation of disease, as the plain fact, whether the disease has ever existed or not for many years?—No, I do not.

Then you consider the plain fact, where it has not existed, the best criterion?—The best criterion; but I do not consider we have arrived at sufficient knowledge with respect to air, so as to ascertain these facts perfectly.

As you touched the plague patients and felt their pulses, and did not receive the disorder, would not that rather convey the idea that the plague was not contagious?—That would depend upon the state of the atmosphere, and on the state and constitution of the individual who had touched the patient; and whether there was a predisposition to receive the disease or resist it.

Did you make the subject of the plague your study, while you was in these places?—From being frequently under the restraint of quarantine, I thought a good deal upon the subject, and read a good deal.

Did you pursue that by inquiries in the country?—By inquiries at the places we touched at; I made a point of visiting the lazarettos when I was on quarantine, and permitted to do so; where there was no lazarettos, I made a point of getting information from medical practitioners.

Were these practitioners Greeks or Turks?—In Constantinople there were Greeks, Armenians and Arabians; some few Italians at Pera.

Were they people who entertained the same opinion on the subject of Predestination as the Turks?—Most had not; some had; that is an opinion they do not avow.

I would ask, whether they stated to you that they considered there was any danger in the use of the clothes of the persons who had died of the plague?—Yes; certainly.

Then you infer, that the plague may be conveyed by clothes or other things, than the touch?—Certainly.

Have you any means of knowing what length of time packages may be conveyed, supposing the air not to operate upon them, or any clothes or materials used by persons having the plague, before they lose the power of communicating the infection; state, either from your own experience or information?—That entirely depends on the ventilation of the packages.

If the packages are not subject to ventilation, you are of opinion that the plague may be conveyed?—It depends on the state of the atmosphere. What I conceive as to cotton is, that it depends on the state of the cotton when it is brought on board. The Turks are a people very superstitious; when a person dies of the plague, they put the corpse into a shell, and sometimes the buboes discharge matter on carrying a corpse to the grave; this matter comes in contact with the dust, or if that dust should afterwards be mixed with cotton, and that cotton comes to England and meets with a diseased atmosphere, I cannot answer for the long conveyance, without ventilation, destroying the infection.

You have no reason to conclude it could not?—I have no reason to conclude it could not. I think a lazaretto properly fitted up with ventilating apparatus, so as to cause a current of air to be constantly percolating through the cargoes, the vitality of any contagion that might be conveyed to England, must be soon destroyed by that means.

Are not animal substances, such as goats' skins, particularly susceptible of infection?—They are; goat skins and hair skins, and Turkey carpets.

Do you think that the bales of goods which are closely packed, and come from Constantinople, admit of such a ventilation without being completely opened, as to give security?—No; it depends much on the state of ventilation at the lazarettos.

I am

I am of opinion, that the airing process might be as efficiently performed, as it now is, in a much shorter period, by a different fitment, attending to the state of the ballast and hold, which in every ship is important, but in lazarettos most particularly so.

You stated, that you thought that one of the things that contributed to the plague, was the stagnant water?—It always contributes to disease.

Do you know that the plague is frequently prevalent in Egypt?—Very well.

Do you happen to know at what period the Nile rises and falls?—I believe it begins to fall about August. I have not a perfect recollection of the history of the Nile.

Do you not know, that the Nile rises during the summer in hot weather, and subsides during the winter?—It subsides during the autumn, I think.

Is plague prevalent in Egypt, during the winter and autumn?—It is more prevalent in summer than in winter.

That is, it is prevalent in Egypt at a time when stagnant water is not found?—Yes, at all times.

After what you have stated, I should like to have your opinion as a physician, whether you would take on yourself to advise, on your own responsibility, the relaxation or the material relaxation of any of the precautions in this country, to prevent the communication of the plague?—That is a serious question; though I have not a doubt but what the quarantine might be with safety considerably diminished, under certain regulations of ventilation and fitment, in lazarettos; yet it is a thing of so much importance that it ought to be proceeded in with the greatest caution.

Do you think any distinction might be taken between persons and goods in quarantine?—Yes, I do.

In what period do you think persons would be safe from Smyrna?—As much quarantine in general as the men of war perform, three days. At Malta, coming from the Morea, I remember bringing a passenger, who was very anxious to go on shore, and they let him out in three days.

Did you ever hear of inoculation for the plague?—Yes, I have, by Dr. White, whom I knew well; the patient died under the disease. I am not sure it was the plague, or whether the disease he died of was from inoculation.

Do you make a distinction between ships of war and merchant ships?—Certainly.

Do you consider it more likely that the infection should be received in the internal part of a bale, or the outside?—That depends on the state of the bale of cotton; the state it was embarked in, whether moist, or perfectly dry.

Is it not likely to exist in the internal part of a bale?—Certainly infection is.

And therefore if it does so exist, according to your doctrine, would it not communicate plague, unless properly purified and ventilated?—That I consider very doubtful; but I should be very desirous to avoid the risk, by having it ventilated.

Do you believe, that the plague can be imported into Great Britain?—I should think it possible, certainly.

Do you think it likely?—No; and I think the vitality of the disease might be soon destroyed if it was.

And therefore you consider it could not long exist in England?—I think it could not long exist in England.

If the air was in a state which admitted of its existing at all, and it was once communicated, what reason is there to believe it would not be generally communicated; why would it not spread?—The disease would be weakened, in the first instance, in the lazarettos, by ventilation and fumigation.

I am assuming a case where there is no lazaretto?—I see no reason why it should not spread, except that the English people are more cleanly, better ventilated in their apartments; and the common shores and drains carry off all filth, which is a great cause of the spreading of the plague in other countries.

If it got among the lower orders of people, who are extremely crowded together in large towns, might it not then?—Certainly, but they would be immediately separated.

Do you think the plague more infectious than the small-pox, or measles, or typhus?—Yes, perhaps more infectious than any other disease; I have never seen any infection from it; I have from all the other diseases named. In the hospital I have now charge of, I had four years ago, about 82 cases of measles of a mild character; I was desirous of two girls being infected, I placed them in the wards; neither of them took it. I changed their linen; they both took it, and passed the disease mildly.

Did you ever know cases of typhus in which there were buboes as in the plague?—

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In high inflammatory constitutions, I have seen an enlargement of the groin, probably a sympathetic enlargement, in the first stage of the disease.

Do you consider the buboes a distinctive character of the fever called The Plague?—I should think so.

Is the typhus fever, such as we have it in England, a common disorder in those regions where plague prevails?—It is not so prevalent, but it is more fatal; the bilious remittent fever is more common.

The typhus exists distinctly from the plague, though not so common?—Distinctly, though not common.

Do you think that different regions, according to their different circumstances of climate, soil, and construction of cities, produce among the people at certain seasons of the year, fevers of a particular character?—Yes, certainly.

Do you think that one case of such fever being contagious, and the contagion transported to another country, where the circumstances are different, they would establish themselves in the other country?—No, only partially, if at all.

Is that your general opinion as to the probability of the plague being transported from the Levant, and communicated to other countries?—Yes; although if it was imported into England during a diseased constitution of the atmosphere, it might do great mischief before the vitality of the disease was overcome.

But you think it could not long survive its importation?—Not long.

And so you think of all other fevers?—All others that are not endemic of the country.

All other fevers characterized by particular circumstances?—Yes.

Do you suppose the atmosphere of England has been applicable to the receiving or generation of plague, for the last one hundred years?—No; this country and every part of the world inhabited, has been more cultivated, underwood near cities has been cleared away, and swamps drained, which has contributed much to rendering the disease milder.

Does not plague occur near the Mediterranean, where quarantine laws are rigid?—Yes.

Do you suppose the plague to be introduced into these places, or generated in the places themselves?—I have never been able to ascertain as a fact the introduction of plague into any place; I have heard it attributed to men and to goods, but never of my own knowledge.

Have you ever heard that the plague which prevails so generally upon the coast of the Levant, has been spread eastward over the continent of Asia?—I believe it has made some progress, but not always eastward.

I should be glad to know your opinion, founded on your general knowledge, why the plague should not proceed eastward through the continent of Asia, by land, as probably it is communicated westward, by persons and goods transported on board a ship?—I consider that as entirely depending upon the diseased state of the atmosphere in these places; and as to its being communicated westward, by persons and goods, I never knew it so communicated.

You must have heard that the plague is frequent in Aleppo, and that the caravans proceed regularly with goods in bales from Aleppo eastward through the continent of Asia; have you ever heard of the plague being communicated by these caravans, to the eastern country?—Never.

Why should not the plague be carried in bales of goods transported to Asia eastward, as well as brought by goods or persons on board ship westward?—I see no reason why it should not.

Does your knowledge of the practice of countries eastward enable you to say, whether the transportation of goods by caravans is calculated in any way to prevent the communication of the plague?—No; but I have seen the unloading of a caravan; the goods are not so closely packed in caravans as in Levant ships. You are aware of the mode they adopt in ships; the cargoes are screwed down; they often raise the beams of a ship in forcing the goods down; and consequently they are more liable, from their close stowage, to retain infection, if infection is embarked.

But the plague might as well be acquired by a caravan, as brought by a ship?—Certainly.

You say you was present at the unpacking of the caravans?—Yes.

Where?—At Constantinople.

From whence did they come?—I have seen one, I believe from Aleppo, I was only present at the unpacking of one, and I am not aware where it came from; they pick up goods the same as our waggons, every where on the road, I was told.

Do

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Do you know that they come through infected countries?—I am not aware of that.

Dr.
William Gladstone

Are you not surprised that the expurgators of goods in lazarettos in Great Britain have never received the plague?—I should conclude from its not having been imported.

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Then you suppose it has not been imported since the establishment of lazarettos?—Yes, I suppose so.

Do you think the epidemic disease under certain circumstances, may become contagious?—Yes, it certainly may become infectious.

Do you suppose that the plague has been imported prior to the establishment of lazarettos in Great Britain?—I never heard that it has been ascertained as a fact.

If it had been imported, would it naturally have occasioned the plague in the community?—Not naturally; it might have been destroyed by the climate, or by management.

How long do you consider the infection of the plague may be latent in bale goods?—I cannot exactly state what length of time it may remain latent in bale goods.

Do you know that there is no ascertained account of the introduction of the plague by importation, previous to the quarantine laws?—Not any that I am acquainted with.

Do you think that the concurrent testimony of all the old historians was merely vague report?—I am not competent to decide; I cannot speak as to that question.

Would you not rather be governed by modern facts, than historical reports?—Certainly, I would.

Do you consider the typhus fever a species of the plague?—Not exactly, but partaking of a highly malignant fever.

Does not Cullen call the plague a high state of typhus fever?—Yes, a high state of contagious typhus, but he never saw it.

Dr. Augustus Bozzi Granville, called in; and Examined.

ARE you acquainted with the Plague, and have you formed any opinion as to its being contagious; favour the Committee with your opinion respecting it?—I have seen the plague, and I have no doubt that it can be conveyed by an individual infected by it, to another in perfect health.

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Where have you seen the plague?—In various parts of Turkey, Greece, Asia, Syria, Egypt, &c., and in Constantinople, where I resided two years.

What are the symptoms and characteristics of plague?—The symptoms are permanent; and during the time the plague raged in Turkey in 1812, they were permanent throughout the country. It is a sudden dizziness, great pain in the head, great prostration of strength, affections of the nervous system particularly; (there are no symptoms of inflammation whatever, not such as attend inflammatory diseases during their first attack;) sickness of the stomach occasionally, and the invariable appearance of glandular swellings, if it goes beyond sixty hours.

Is it not also attended with carbuncles?—With carbuncles and other pestilential eruptions, particularly livid spots on the body, partial mortification of the body.

What do you consider the cause of the plague in Turkey?—It is a question no practical man can answer; it is entirely unveiling the mystery in which all diseases are enveloped; I can only answer that it does exist, and is conveyed in the way I have stated.

To what do you ascribe our not having it in Great Britain?—To the regulations of the quarantine laws. It appears to me, as far as I can judge of the nature of a disease without knowing its origin, that being endemical at certain particular parts of the globe, it might explain why it is not peculiar to this country unless imported.

Does it not often appear in places in the Mediterranean, where the quarantine laws are severely rigid?—Never, except in lazarettos, or where a violation of those laws has taken place.

Then you conceive it must be imported, and that it cannot originate in those places?—It does not originate; certainly not.

What precautions are taken to prevent infection, by the Frank inhabitants of Smyrna and Constantinople, and other places visited by the plague?—If they can afford it, shutting themselves up in the houses before communication with persons infected; if they are obliged to go abroad, as some are, such as physicians who have their livelihood to get, some wear oilskin dresses, oilskin gloves and other medical precautions

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precautions to prevent breathing the infected air; others anoint themselves with oil, and avoid contact as much as possible, under a strong persuasion that contact produces disease. In Egypt and Syria they shut themselves up as soon as there is a rumour of the plague, and never quit till the dews fall, that is, till St. John's day; then they come out, and proceed to church in order to sing Te Deum.

During the prevalence of great disease in any of these towns, did you ever know the plague destructive in the families of the Franks, who avoid contact with diseased persons?—No one instance, where contact or some other conveyance, by goods or other articles, could not be ascertained. If the Committee will allow, I will state a circumstance as to the house in which I lived myself. The house was one of the chief houses of the Hospadar of Wallachia, Prince Suzzo; that was the house where I lived for eleven months, during which time, at one period, in 1803, the plague prevailed; the precaution of shutting up the family immediately on the appearance of the plague, was never omitted; and no one case was on record in the family, of any plague having occurred within the walls of it.

Could such a circumstance possibly have occurred, provided the plague had been an epidemic disorder; could the shutting up of one house in an infected city save the family?—Certainly not. But the plague is not epidemic. I can bring cases in support of the assertion with regard to the plague not being an epidemic distemper, and that it does not depend on atmosphere or ventilation.

Do you not conceive, that in the case of contagion, the state of the air may have the strongest effect in stopping or promoting the effects of the disorder, as you have instanced in the case of the procession on St. John's day?—It may render the person exposed to the contact, more or less liable to feel its effect, but will not operate in checking the disease.

To what do you attribute the periodical appearance of the plague in the spring and autumn?—Because the seasons have an influence on the character of the disorder, the same as in this country; in winter you are more likely to catch a cold or catarrh.

Can you guess how plague was originally produced?—I should premise by stating that the impossibility of ascertaining the origin of a disease does not do away with its existence. Every medical man has attempted to form an opinion; and, I should state in answer, it is most probably an endemic disease, at some particular parts of Egypt. The first mention of it is as coming from that country.

What authors do you refer to?—First to Thucydides; though I am myself of opinion, that the plague of Athens, mentioned by him, was not the plague of the present day. The other authors are Muratori, Guastaldi, Foderé, Nacquart, and very recently Jourdan and Valli.

Are cases of plague pretty frequent in the division of Constantinople called Pera?—Not so frequent, of course, as in Constantinople, because every Frank takes precaution against the disease.

Is the suburb of Pera differently built from Constantinople?—It is a little more elevated, and is a long narrow street; as to the houses many of them are of stone, whereas in Constantinople they are chiefly wood; and the streets are wider at Pera than they are at Constantinople, generally speaking.

Is Pera upon the whole, from its situation, a more airy place than Constantinople?—More than some parts.

Do you think Pera is a less likely situation for the production of any disorder peculiar to the climate, than Constantinople?—I should say that there is no difference, except with regard to the crowded state of the houses, the topographical difference would not make much. The street leading from Constantinople to Pera is one of the dirtiest streets in Constantinople.

Have you been at Aleppo?—I have been at Aleppo.

Do you know that caravans proceed very frequently for the conveyance of goods from Aleppo eastward, through the continent of Asia?—Certainly.

Have you ever heard that the plague was conveyed by those caravans, eastward, so as to establish itself?—Not except among some of the few thinking Christians; the mass of the people never think of the disease at all; I have heard it among a few persons I have conversed with, and who thought the plague could be carried.

Has it actually been carried eastward?—I have no knowledge myself.

Do you believe it?—I do believe it.

Have you heard so?—I have heard so, but I do not know it.

In cloth carried eastward?—In the caravans leaving Aleppo; I have no knowledge myself of the fact.

Have you ever heard of any city, to which the caravans proceeded, becoming the seat

seat of the plague?—Damascus, in 1804; it was carried by the army of some Pashwa, who had been on the coast to assist in the reduction of Jean d'Acre. Bagdad is often, and has been lately infected with the plague.

Have you heard of any other instance?—None from Aleppo.

And none of the plague carried eastward?—Not to my own knowledge.

You have not heard of the plague establishing itself, and destroying the inhabitants, in any of the interior cities of Syria, except in Damascus in 1804?—I have had no means of investigating that.

Have you ever been in Smyrna?—I have been in Smyrna.

At the time of the plague?—Not when it was very prevalent; but when a few cases were reported to the different consuls, so as to induce them to give to the vessels a bill of health, which is called A Suspicious Bill, *touched*; that is, infected.

Have you ever heard of the plague being communicated from Smyrna to the interior cities of Asia Minor?—I have not heard any particulars.

Have you ever heard of the plague being at Brusa in Bythinia, eastward of Constantinople?—I will not take on myself to say.

Have you heard of the plague being communicated westward of Constantinople, over land to Adrianople and other cities?—I have.

To Adrianople?—Yes.

Do you know instances of the plague being destructive at Adrianople?—I believe the plague raging in 1812, was nearly as fatal as it proved at Constantinople.

Have you heard of the plague being communicated from vessels from Smyrna, to many parts of the Levant?—Continually.

What is your opinion as to the infectious nature of the plague to be carried in bales of merchandize?—If the word infectious is to stand in my examination, I beg leave to qualify it. The plague is not infectious, as the yellow fever is; but it is contagious, which explains the way in which it is carried; for infection cannot be carried.

Explain the difference between infection and contagion?—Contagion is a mere mode of action resulting from the habit of certain diseases, to affect individuals; it is not a principle, such as the electric fluid and such kind, as many persons give an idea of in their writings, flying about the air. Contagion expresses this: during such a disease as the plague, there are certain animal emanations which partake of the morbid state of the body from which they issue; when these are applied by direct contact, or by any mediate contact, namely, objects on which these emanations rested, to an healthy body, it will contract the disease. Infection is this: infection is a peculiar state of the atmosphere, which has been rendered unfit for the healthy exercise of life, by the crowding together of a number of persons ill of the same fever, in a given place, and during a given time; thus an epidemic may become infectious.

You mean epidemic influence; what is your opinion of the contagious nature of the plague to be carried in merchandize from one country to another?—The answer is included in the one precedently given; I stated that the plague, and two or three other contagious diseases, seem to give out, as the body does, certain emanations, which must partake of the same disease as the body; if these are applied to goods liable to receive and nurse it, even then the principle of the disease (if you call it the principle, but I am averse to such a name) may be conveyed, by such articles containing the emanations being carried about.

Do you think that articles so contaminated by the matter of the plague, would retain the matter for a long time, so as to communicate the disorder upon being touched?—There are examples, and those very authentic, proving that this matter of the plague can, if applied to an healthy body, cause the disease to break out even at a very long period after; and I should mention several months. There is one instance in point, among the most recent, and it rests on the highest authority. During the plague at Corfu in 1815, one of the villages which had been infected several months, had for sometime, I believe for 43 days, exhibited no sign of the plague, owing to the measures of segregation adopted by Sir Thomas Maitland; the village was reported to be released, and fumigation, preparatory to its receiving *Pratique*, ordered; the officer who had the *surveillance* of the village during the three or four months had resided in the church, from there being no house that was not thought infected, in which church the people and the priest had been crowded just before the laws of segregation were ordered by Sir Thomas Maitland; some of these died subsequently, for the church was ordered to be shut the instant the plague begun. It was therefore necessary to purify the church before the people could go in again, as well as the village altogether. Leave being granted, the priest went in, and touched the cloth of the great altar, so

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as to shake it to purify it, when he was seized with the plague, beginning with the head-ache, so as to cause him to fall on the steps of the altar almost immediately; and in three hours before, he could be carried to the lazaretto, he expired, with buboes under the arm and livid spots over the body.

I thought you said in a former part of your evidence, that the buboes only appeared when the disorder continued certain hours?—When it continues sixty hours they are sure of coming, but they may be earlier. I merely said, that the glandular swellings must appear if the disorder goes beyond sixty hours.

Do you think, from your general knowledge of physiology, that the priest then took for the first time the infection of the plague, and sickened on the spot, so as to die of the plague in three hours from the time of touching the cloth of the altar?—From analogy to the rapid action of other poisonous substances with which I am acquainted, I should think there was not the least doubt as to the priest having been infected for the first time.

And do you think he took the disorder by contact through the skin of his hand with which he touched the cloth, or by any effluvia from the cloth which he might have inhaled at the time, when he went so near as to touch it with his hand?—Certainly through the skin; because, if the effluvia had arisen from the cloth there is no reason why the officers who had resided there two months shut up in the church, should not have felt the effect.

Did he fall down upon the steps of the altar, immediately after touching the cloth?—He was seized with a dizziness of the head; touched with the plague: there came on dizziness, and he fell in a fainting fit; he was seized with the plague. It is the usual expression; the case is stated thus: he was seized with the plague, and died in three hours afterwards.

Do you believe the case to be exactly as you have reported it?—From my knowledge of several facts, such as I can have no hesitation in believing.

Have you seen such instances yourself?—I have not seen them myself; but I have had them from such good authorities, where I met with them, that I cannot doubt their truth.

And such an event is agreeable to your general knowledge of physiology?—Certainly; I do not see any law in physiology that can prevent the belief that virulent poisons can be carried into circulation, and go through the lymphatic system in less time.

Then, according to your opinion, the plague must be brought; the contagious matter of the plague must be brought either by persons or in bales of goods on board ship from the Levant to England, and persons touching the infected portion of merchandize packed in these bales, must exhibit such phenomena in the lazarettos in England, as you have described to have been reported to you to have happened in the village in Corfu?—Without the smallest doubt, that is my firm belief; cases in point have happened at the lazaretto at Leghorn since 1814; at Marseilles within fifteen years, twice; and recently, according to the dispatches of Mr. Hoppner, the British consul at Venice, in October 1818.

But you have not heard of such instances in the lazaretto in England?—No.

Have you ever heard of the plague being caught by any of those persons appointed to see the quarantine laws put in execution in the lazarettos in England, and who in discharge of their duty must be liable to such communication with goods and persons, as would expose them, one would think, to the contagion?—I have not heard of any cases of the kind happening in England to my personal knowledge, but I have never made inquiry in England.

Do you think it extraordinary, that in the lazarettos in England, none of the officers appointed to carry the quarantine laws into execution, should not have caught the plague?—In order to answer whether it is extraordinary or not, I ought to know whether a vessel arriving at a lazaretto has performed any quarantine or made any stay in the Mediterranean ports; whether they have come direct; whether before the bales have been touched, there has been purification and other means of precaution observed.

You have stated, that the contagious matter of the plague being entangled in goods fit to preserve it, may remain in a state to communicate the disorder for many months?—I do think so.

Do you not think it likely, that by some accident in a long course of years, from the contagious matter of the plague, and from the nature you think it to be, it might have been introduced into England from the ports of the Levant?—I should humbly conceive, that its non-appearance in England does not do away with the contagious nature

nature of the disease; it must be supposed that the goods had the plague; I should say then, that the expurgators could not avoid having the plague.

Then, as they never had the plague in our lazarettos, you naturally conclude that those goods which arrived, were not on their arrival infected with the plague?—Certainly not, if they had been touched by several individuals on their arrival before purification, and they had not excited symptoms.

Are you aware, that during the prevalence of the plague in the Levant, goods are in general not allowed to be shipped for England under the quarantine laws, till after the disease has ceased?—I am perfectly aware of it.

Would not the length of time after such goods were shipped, and the length of the road to England being so great, be sufficient to account for the contagion being considerably weakened?—If the length of time is very great between the time of shipping and unloading, and if certain circumstances have taken place, either on the removal of the cargo during the voyage, or in altering it, or the vessels meeting with bad weather and being washed over and over again, it is not improbable to suppose that part of the plague-matter, if any existed in the cargo or attached to any part of the vessel, may have been weakened in its virulence; but I beg to give that as a supposition, and not as my belief, because we know that all poisons may be qualified by many circumstances, so that the strongest may not have effect. A barrel of gun-powder may not take fire with a red-hot poker, under certain circumstances; that is, if by moisture you render it incapable of combustion.

Are not different persons, in different climates, more or less susceptible in various degrees of contagion?—No doubt: the prevalence of certain circumstances, both with respect to individuals and climates or seasons, would very much forward or diminish the chance of the person receiving the effect of contact.

Would not those circumstances, and the length of time which elapses in a voyage between the Levant and England, account for the very rare degree of contagion which has taken place in England, without supposing the impossibility of it?—I should think it scarcely probable, that if what I have called a contagious matter is in the bales of goods, unless the period of time is very great, that it would fail to excite the disease.

Would that account for its not having taken place during the last 154 years?—The only way I can account for its not having taken place is, that it was never shipped from the Levant; for though I admit there is a probability that circumstances will diminish the virulence; I do not admit, that if the disease is shipped on board, any circumstances will prevent its spreading.

Is not the fact of its never having occurred for 154 years, sufficient to inspire the confidence that it cannot exist in a British atmosphere?—Neither 154 years, nor six or seven centuries can give such hope, when we know that such a disease existed before.

Was the plague of 1665 the plague of the Levant?—No doubt, according to Dr. Mead.

Lunce, 22^e die Martij, 1819.

SIR JOHN JACKSON, BARONET,

In the Chair.

John Green, Esquire, called in; and Examined.

YOU have been many years treasurer to the Levant Company?—Yes.

Have you ever been in Constantinople?—Yes.

During what time?—I was there from the year 1774, to the end of 1780; six years.

During that period have you seen the plague?—Yes; a very bad one.

A raging violent plague?—Yes, in May, June and July, upwards of 200,000 people died.

In what year?—I think in 1778, speaking at this distance of time.

It was considered a furious raging plague?—The greatest that was ever known till about five or six years ago, when there was one rather more violent.

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Were you exposed to it yourself?—I was in the city the whole summer.

Did you walk about?—At first; till it began to be violent.

Did you take the plague?—Not that I am aware of; I was ill, and I had a fever about a week. I had a gathering in the throat, which broke out.

What month was this?—About July.

Some time after it began?—During the heat of it. They sent a doctor to see me, a Greek or Italian, who was physician to the Grand Signior's sword-bearer. He opened the door of the room, and desired me to put my tongue out. He asked me a few questions. He said, "I cannot come in, because (mentioning a person) I was called in to see a few days ago, and he was in the same situation you are, and as I was passing his house just now, I saw them carrying him out to be buried." I said I am not under any uneasiness, except with respect to the complaint in my throat.

How long might you remain ill?—About a week in extreme pain. With extreme pain in my throat so that I could not sleep; when I attempted to swallow, the saliva would make me start.

Did it break?—It broke internally. I had not slept for some days in consequence of the pain. I fell asleep, and I had slept for about 15 or 16 hours; when I awoke, I felt myself quite at ease and comfortable, with my head inclined on a chair at the side of the bed, and there was a deal of matter that had issued from my throat.

Was it white matter?—Rather yellowish: pus, I should call it.

During the other part of the time you remained in Constantinople, was the plague there then?—It did not cease afterwards.

What is your opinion as to the cause of the plague?—I think it is an epidemic, occasioned by a particular state of the atmosphere.

Do you consider it contagious?—I think it is contagious so far, that if you come in contact with the person actually ill, I should have apprehension in that case, just as I should of any fever.

Have you any decided reason why you consider it contagious?—No other than that, I do not think it of the nature of the small-pox. I do not think it can be communicated by the clothes or goods; by goods, certainly not.

What do they do with the clothes belonging to persons who die of the plague?—Sell them; they never destroy them.

Have you ever known the clothes to be the cause of the plague in other persons?—No; I have strong reason to think they are not the cause.

Why?—Because the people who deal in them are not infected.

Have you ever known any specific person who dealt with them, not infected?—No; but it is a general remark, that the dealers in clothes do not take the plague.

Do they do any thing with the clothes?—No, not the natives; the Europeans generally wash them, but there are so few cases of plague among Europeans that I do not allude to them. I will state the reason why I think they are not infectious. It is, that the plague frequently ceases suddenly; it ceases and does not recur for two, three, four, or five years; and the clothes not being destroyed, but generally distributed and worn as well as the bedding, I conceive that if they were contagious it would be impossible that we could be without the plague during that period.

Even the bedding is sold, you say?—Even the bedding is sold. There is a custom in Turkey, that if a stranger dies in the plague, the Governor or Pasha takes possession of his property, and the clothes are part of the property; and of course he orders them to be sold for his own benefit, and they dare not destroy them.

Then the governor is interested in the sale of the clothes?—Certainly; that is his perquisite.

Do you consider that the same person can have the plague more than once?—Yes.

Have you known instances?—Yes.

Decided instances?—Only from common report.

Is that the general belief of the Turks?—Yes; the general belief of most people; but there is a particular symptom, I have heard, that if a person has the plague with a particular species of buboe, I forget the modern Greek word for it; they call it the Blessed; when they have had that they are not liable to take it again so much, if they do, it is only slightly.

That is the prevailing opinion?—The prevailing opinion of the natives. The people of the country.

Have you seen persons who have had the plague more than once?—I have seen the Abbé, who had the care of the Frank hospital at Constantinople. I heard that he had had it 10 or 12 times.

Did

Did he acknowledge so himself?—Yes.

Had he been very ill?—I rather suspect he had not.

What was he?—He had the care of the Frank hospital.

He used to have it several times?—Several times, but he was not afraid of it.

Have you known particular shops where they sold the clothes?—They sell them mostly in the street, like Rag-fair, or Monmouth-street, opposite our own warehouses.

How near your warehouses?—The streets are very narrow; I do not think they are above twenty feet wide, so that you are obliged to pass very close to them in going to your warehouse. I cannot say that all the clothes exhibited for sale are the clothes of people who died of the plague.

But they make no distinction whether they belong to plague patients, or not?—Never.

State any facts that occur to you?—It had been generally conceived that the plague was put a stop to by extreme hot weather, or extreme cold weather, and I thought so too till lately. I am of opinion it is not the heat, but the effect of the heat. It is the fall of the dew that stops it, because the plague prevails at Alexandria, in Egypt, occasionally, till the 24th of June, at that time the sun has such power, that it occasions strong exhalations; a strong fall of dew, almost like rain; and it is so much a matter in course, that the people, on the 24th of June, who had shut themselves up, came out without any apprehensions at that time. And about five years since we had very strong fogs here in London for about 14 days, so that we could not see across the street. At that time I had a letter from Mr. Morier, consul general, dated, I think in February; in which he stated, that the plague that had begun to be very prevalent had all on a sudden entirely ceased; and that he could not account for it, unless it had been occasioned by the extraordinary continuance of dense heavy fogs; but that it ceased. When I received the letter, it occurred to me to inquire as to the state of Smyrna. At Smyrna it is expected to cease about the month of July, and generally does cease during the great heat. I inquired of a captain of a ship that had been many years in the trade, whether during the great heat at Smyrna, in the month of July, there was any appearance of dew. He stated, certainly; and upon asking his reason for giving me so direct and immediate an answer; he said he was certain of the fact, because during the hot weather the crew slept on the deck; but that in the month of July, when the sun became powerful, it occasioned such a heavy fall of dew, they were obliged to go below to sleep; it would have wet them through. This is what he stated to me; and I was very particular in asking the reason, because he answered so immediately. I wanted to know his reasons. I do not feel myself competent to decide why the dew has that effect. I always understood from the Armenians and other natives of Constantinople, that exposing clothes of infected persons in the night to the dew, would more effectually render them innoxious than putting them a week in the sun.

During the six years you was at Constantinople did the plague cease, and for what time?—Some months at a time.

Did it cease for two years?—It had not prevailed for two or three years when I first got there. I arrived in 1774, and to the best of my recollection the first instance of plague was the beginning of 1778.

From 1774 to 1778, you believe there was no plague in Constantinople?—None at all; at Smyrna they have been without the plague for three or four years. After the Quarantine Act was passed in 1800, I mean the first Quarantine Act, for the first Report we made was in 1800, (the quarantine permitting ships to come from Turkey with clean bills of health was in 1800) I predicted that we should not have any further foul bills of health, and I will state the reason. The bills of health are determined by the foreign consuls at Smyrna, upon the report of a number of Greek merchants who form a committee for the purpose. These merchants carried on principally the trade between Smyrna and Holland, that is, several were concerned; it was their interest to establish foul bills of health in order to keep the trade to themselves; because English ships could not come to England without going first to Malta or Leghorn, or some other lazaretto in the Mediterranean, to perform quarantine of ninety days. In the mean time the Greeks loaded cotton wool and other goods, and all the articles which constituted the chief object of the trade, in ships, which they sent to Holland: there they have no quarantine establishment. The practice in Holland is, to take a few of the goods out on the arrival of the ship, which they put into a lighter alongside the ship and cover up the hatchways; at the end of twenty-one days, the ship and lighter go up to the quays and discharge their cargoes; sometimes the cotton is transhipped in vessels bound to London without being landed. On their arrival in England they

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they were liable to fourteen days quarantine in Standgate Creek, where they merely cut a little slit in one side of the bales of cotton; after the end of fourteen days, the cotton was sent to London in the same vessel or in lighters, and of course immediately sold and distributed among the manufacturers, without any other precautions than I have stated. By these means the Greeks anticipated us, and we could not carry on the trade; but there is another reason even now, to influence the bills of health. The committee who decided on the plague or no plague at Smyrna, during the time of the plague when it was known to prevail, collected from the Greek community a certain sum weekly (I am not aware that they collected from other people.) That is for the avowed purpose of rendering assistance to persons afflicted with the plague, but there is no account rendered of the distribution; consequently, so long as they can establish the plague to exist, they collect these contributions. On the other hand, when there has been no accident from the plague, and clean bills of health are issued, then the community resist as much as they can the first allegation of an accident from the plague, in order to save their contributions. The plague is said to originate sometimes in Smyrna. It prevails most in particular low narrow streets, where the houses are so close that you can shake hands across the way, and which are inhabited by the very lowest classes of people; a place into which no European would chuse to go, therefore we do not go to investigate it: it is a situation where fevers must necessarily be expected, from the confined air and want of ventilation, and the concourse of persons existing in such numbers there. I also think the plague is not necessarily taken by contact; because during the plague in 1778, I have seen the man who brought provisions to me to my house where I lived, and who went errands for me, I have seen him a dozen times every day take off the bundle of clothes belonging to people who had died of the plague, Armenians. They are buried without coffins, but carried on biers; and when they are put into the grave, they bundle the bed and clothes into a sheet and bring them back again, bring them home. There was a winehouse opposite our house; I have seen our man who attended me, I have seen him take the bundles from the men's backs as they were returning from the funerals a dozen times a day, to go into the winehouse to get a glass of wine. I have also seen him very frequently assist people staggering in the street from debility, from illness to walk home to their houses, during the height of the plague; and I remonstrated with him on the subject, and he told me he did not trouble himself about the plague: he was very much in the habit of getting drunk, half drunk all day. I have seen him lie in the street, and persons passing the dead over him, kicking him out of the way like a beast or a log. When the plague first broke out, in 1778, the son of an Armenian merchant, opposite our house, was taken ill; and an intimate friend, a companion of mine, who was clerk in the counting-house of the Armenian, was sent with this young man that was ill, to a place called Ortaquey, a village about four miles from Constantinople, on the borders of the Bosphorus, and there he remained for nine days. At the end of that time the young man died, and it proved to have been the plague; my friend had attended him day and night, during the whole of his illness, and slept in the same room, on the same sofa probably, (for the sofas go all round the room,) and he was not at all affected by it, and did not take the plague. The family afterwards went to another village, where the English gentlemen are; it is called Buyakderé. About a month afterwards I was sent for by Mr. Abbott, to assist him for the post which goes once a fortnight, with whom I was. There I took the boat and rowed down to the other end of the village, where my friend was, to inquire for him. I saw him, and agreed to go fishing with him the next morning at four o'clock; and I went, but he did not come. I waited till five, and got a person to knock at the door; when he came, he told me he had had an unpleasant affair that morning. The servant had not got up as he had ordered him; he went to his room to inquire the reason, or to call him. The man said, "For God's sake do not come near me, I am very ill, and I have got the plague." He had been down to Constantinople two or three days before; this was at the very height of the plague, in July, I think. He said he would not allow the man to lie in bed; made him get up, and assisted him out of bed. He told him to have courage, that it was no such thing; he made him brush his coat and get his coffee ready, and then told him to go and get the boat ready. Not finding that he had done it, he returned to his room again, and found that the man had laid down on his bed; and he said it was impossible he could go, for he could not stand upon his legs, he was so ill; his head was fit to split; and he repeated, that he was certain it was the plague he had got. Upon this my friend immediately called up the master and mistress of the house, and they sent an old woman in the house, who had been a nurse to people in the plague, and who understood

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understood the disease, to examine him; and she declared it was the plague the man had got. In consequence of that they sent him out of the house, down to their own country house, where the son had died; and this man died in about a day or two afterwards. About a fortnight after that I returned again to Buyakderé, and went to see my friend. He told me that he had had another unpleasant case, two or three days before. One of the maid servants had been unwell for some days, but she went about the house, with her head muffled up, affected. She said she had got the tooth-ache or a swelled face. He said he met her in the passage, and got hold of her and gave her a shake, and told her to hold her head up and not be moping about; that it was nothing at all. He spun her round by the elbow, and she immediately called out, and clapped her hand to her groin, and said that he had hurt her very much. He said he immediately suspected that it was something more than a mere cold she had got.

Did it prove to be the plague?—He sent the old woman to examine her, and they found it was the plague she had got, with a buboe; the impression on my mind is, that he said the buboe had been broken; it was in a state of suppuration; she was sent down to their own house, where the man was sent; but she recovered, she got well. During the whole of this time, neither my friend nor the master or mistress of the house, were at all affected by the plague; nor did I hear of any other person amongst them who was.

Then, you consider there are often instances of the plague, without its spreading in the community?—Yes; it has been a common observation, that if the plague exists at Constantinople and not at Smyrna, if persons infected with the plague go down from Constantinople to Smyrna, although they die there, the plague does not spread at Smyrna, and *vice versa*. It is generally considered, that if it is carried from one place to another where there has not been the plague, it does not spread. There was an English ship, last year, I think, or the year before, the *Smyrna*, captain Farmer, carried down two Turkish passengers from Constantinople to Smyrna; one died of the plague and the other was landed at the fort, about seven or eight miles off Smyrna. The ship was, on her arrival at Smyrna, ordered by the consul to perform 40 days quarantine, to be fumigated before they would permit her to take in any goods; but neither the captain nor any of the crew were affected by the disease; they did not take it. I believe there is no instance on record, of any English sailor dying of the plague on board the merchantmen in Turkey.

Do you mean British merchant ships?—British merchant ships.

Have you sought for information of such accidents?—Of course, it has been a subject of great interest to me, and I wished to investigate it; and I have thought their escape from it may probably arise, not only from the different habits, living freely and drinking wine; but also from the English sailors in general sleeping on board their ships, where there is a great difference in the atmosphere, from what it is on shore, perhaps eight or ten degrees.

Have you ever known fever arise from the moving of any quantity of earth near dwelling-houses?—No. Another circumstance is, all the European merchants in Turkey employ brokers, who do all their business, buying and selling for them; these persons go about freely during the plague, buying and selling goods, and collecting monies. I do not recollect any instance of any of these people taking the plague; I have only heard of two instances.

You never knew a plague case on board a British ship?—I have paid most attention to Smyrna. I have heard of instances, where the Greeks who are employed to stow the cargoes, but although they have been sent ashore ill, and supposed to have the plague, it has never infected the English sailors.

How does it happen, do you think, that the brokers never take the plague?—I cannot account for it.

Do they dwell in a different part of the town?—They do not live with the merchants; they live in different parts of the town.

What countrymen are they?—Jews and Armenians.

Do they abstain from wine?—No, they drink it freely.

Do they not use precautions?—I rather think not; there used to be a custom as to the mode of receiving money, rather different from what it is now; there was a small half tub with water inside the railing in the court yard, into which the money was thrown, and I used to take it out of the water immediately. It was supposed any thing immersed in water would be purified; they used to throw in the meat, and every thing brought in the house, except the bread and flour; the bread is considered not to be capable of infection.

Does the plague in Turkey generally decline suddenly?—Almost always.

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When any numbers are infected?—Yes.

Does it observe regular periods of commencing and ceasing?—Generally it prevails most towards the winter at Smyrna, and Constantinople in summer.

Then there is no apprehension in Egypt, Asia Minor or Syria, of receiving the plague from Constantinople?—A notion prevailed originally that the plague of Egypt was more dangerous than that which arises at Smyrna or Constantinople; and if a case happens, of a person infected coming from Egypt to Smyrna, and occasioning a foul bill of health, it has been generally believed that the plague would spread; but there is an instance, just occurred, which is directly in contradiction to that. I think about the month of November last, or December, a foul bill of health was issued at Smyrna, in consequence of some persons arriving from Egypt infected with the plague; but instead of the plague spreading at Smyrna, the letters received to the 11th February state, that the vessels which had sailed a few days before had sailed with clean bills of health, and that the plague had not spread.

You consider then, that the plague cannot be produced from goods nor from clothes?—I had always been of opinion that there had been danger in clothes, until I reflected on the facts which I have stated to the Committee this day.

What is your present opinion?—My present opinion is, that it is doubtful whether the clothes which are at all exposed to the air will be dangerous; I am convinced that the plague never has been brought from Turkey to this country, or to Holland, nor ever will be, by mere merchandize. I do not think that the plague was carried to Messina nor Marseilles by merchandize; because in both instances I had occasion to remark to the Quarantine Committee in 1800, that Dr. Russel, in his publication on the Plague, expressly stated, that the plague existed on board the ships at the time of their arrival in these places. The ship that was supposed to carry the plague to Messina came from the Morea, from a place where the plague had been very prevalent; some of the crew had died; she was only 36 hours coming from the Morea to Messina, and the captain himself was ill at the time, and he died within a day or two after he had communication with a person who smuggled on shore a box of jewellery. The ship that took the plague to Marseilles had loaded at a port on the coast of Syria, where the plague had not prevailed for two years. After she sailed from Syria a contrary wind forced her into another port on the coast of Syria where the plague had prevailed; and she took on board several Arabs, passengers, merchants, to take them to the island of Cyprus. Some of these persons were ill of the plague at the time, and died; after that the crew, some of them took the plague, and they had put into more than one port, and had been driven from other places, and had the plague on board actually at the time of her arrival at Marseilles. A passenger went on shore (for there was no quarantine establishment, at least it was not rigid;) the passenger went on shore, and shortly after the plague appeared at Marseilles. Dr. Russel states in his publication, that when he was at Aleppo, he heard that the plague had appeared at a particular quarter of the town, and, out of curiosity, he went to ascertain the fact. That he found a person who was ill, said to be of the plague; that he made him get up in his bed, and pulled off his shirt; he examined him, and found either a buboe or other symptom that satisfied him it was the plague he had. But, on going home, he recollected there were two English ships loading at Scandaroon, (which is the port of Aleppo) that were nearly loaded, and if he had mentioned that he had discovered the plague to exist, they must have had foul bills of health, and could not have come to England; therefore he said nothing about it, but went and mixed with his friends as usual. A few days afterwards he heard of other accidents, and did the like. I stated this to Dr. Russel as very extraordinary; I asked him what precautions he had taken. He said, he had fumigated his clothes and washed his hands with vinegar. But I observed that he could not at the time have entertained the same opinion as to the danger of the plague as a contagious disorder, or he would not have run the risk voluntarily of such an examination; and that if he knew of any specific, any thing that would prevent persons from taking the infection, I conceived he ought to publish it.

Was you ever at Aleppo?—No.

Do you know of caravans going from Smyrna inland?—Constantly.

Have you ever heard the plague was carried eastward by these caravans?—No; I have heard it remarked that the plague did not extend beyond Turkey.

What are the principal great cities?—Bagdad and Bussorah; they also go through Armenia to Persia.

Have you ever heard of the plague being carried to Bagdad or Bussorah?—No. To Moscow?—No.

When you was at Constantinople, at the time of the plague, did you hear of caravans

caravans going to Brusa?—No; the goods are crossed by the Sea of Marmora; there is very little communication between Brusa and Constantinople. The vessels that take the silk from Brusa load at a port on the opposite side of the Sea of Marmora, opposite Constantinople; but it is in general carried by caravans to Smyrna.

Did you ever hear of a trade by caravans to Angora?—No; I had so little communication with that place, that it is not possible I should.

Where do the caravans from Constantinople eastward go to?—They go from Scutari to Angora and Trebisonde; but we had so little to do with them that I had no occasion to inquire.

You never heard of the plague being taken?—I do not believe there is a Frank house established at Trebisonde; it is a wild country, and the inhabitants are savage.

Is the plague often carried westward of Constantinople to Adrianople?—I do not know whether it was conveyed; it prevailed there.

How far is the distance?—Three days journey.

About 100 miles?—Yes, I believe it is but three days journey.

Are there any regular caravans from Constantinople through Romillia southwest?—I should rather think so, but almost every thing goes by sea; they go as far as Salonica; very likely the expense would be too great.

What is the distance from Constantinople to Salonica?—It is eight or ten days for a messenger. I do not think it is above three days sail; much about the same distance as Smyrna.

You have stated, that you have often known and heard of the plague on board British ships, where the persons were not British subjects?—I have heard of accidents, rather suspicions of plague, which did not communicate to the British crew; only to the Greeks employed to stow the cargo.

Have you ever known a plague case in Great Britain?—I think the typhus fever is the plague in a milder degree.

Have you ever known any person who handled the goods in quarantine, infected?—Not in England.

To what do you attribute our never having seen the plague in England, for a great number of years?—I think it is owing to the state of atmosphere.

And you do not think the goods which arrive in the quarantine establishment, could produce plague?—No.

Do you mean to say only persons?—I should not apprehend the danger of the plague being brought by any way but by persons actually infected with it.

As you have never heard of persons infected, to what do you attribute it?—To the climate.

Do you conceive the climate materially altered since the plague in London?—Certainly; not only the climate, but the circumstances of the country generally, and especially London itself; the improvements in London render it generally less liable to epidemic disease.

Do you conceive the plague could exist in a city of the latitude of Edinburgh?—I should think not; I have many doubts as to the identity of the plague in London with the plague in Turkey.

Do you mean in 1665?—Yes; the symptoms do not appear to me to be the same.

Are you aware, that a great and extensive plague prevailed at Moscow, which is in the latitude of Edinburgh?—I have read of a plague in Moscow. I beg to state it is by no means my opinion, that the performance of quarantine should be abolished. I think that many modifications may be established without any risk, but I am by no means of opinion, that it would be proper to abolish the regulations altogether; not only because I conceive it necessary to have a proper examination of all vessels arriving, to see the state of health of the crew and passengers when they arrive; but I conceive it also absolutely necessary, that we should observe certain formalities of quarantine, on account of our connection with other countries where a more rigid quarantine is conceived necessary. If the quarantine establishments of this country were abolished, no matter why, it might occasion a prohibition of our vessels in other ports.

Have you had occasion often to go on board the lazarettos in England?—Yes; I performed quarantine in Standgate Creek, and have been on board the lazarettos.

Frequently?—Not frequently.

Do you know the process of ventilating goods?—Yes.

State it?—The English lazarettos are old men of war, with houses built upon them like an ark; the sides of these house are open like a brewhouse, with shutters, and the floors

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floors are all open gratings in fact, so that the ventilation is excessive on board these vessels in Standgate Creek, greater than it is possible to give on any building on shore. The ships also swing with the tide; that is, when the tide turns they change their sides to windward every six hours. I remember Sir Gilbert Blaine and Dr. Johnson went down to Standgate Creek to examine the floating lazarettos, and they stated the ventilation was the greatest they had ever met with. Dr. Johnson told Sir Lucas Pepys, that the ventilation was greater than the north-west winds on the coast of America.

What is done with the bales?—A different process is directed for different species of goods.

What is the practice?—In some of them, the bales are to be ripped open on one side, sufficiently to let in the air, and for different periods of time, for common bills of health and foul bills; in one instance they undergo 15 days quarantine, in the other 40.

Is the internal part of every bale exposed?—It is impossible; but certain articles are ordered to be emptied out of the packages; supposing a ship comes with a foul bill of health; supposing goats wool, the order is to empty it entirely, so that they ventilate the articles in bulk; but the bales that have been ripped open on one side, continue so for a certain number of days, when the side is sewed up again; and the other side of the bale is ripped open and exposed for a certain number of days, in like manner.

Do you mean the internal part of the bale?—They are ordered to introduce their arms as far as they can; the people who manage the expurgation of goods there, are ordered to push their arms in as far as they can; it is done for the express purpose of ascertaining whether there is infection.

If there was, is it not likely to be the mode of catching it?—I should suppose it was.

How many are ordered to be opened?—The whole in general.

Does that include silk?—Yes.

Cotton?—Yes.

What is done in respect of corn?—Corn is under a different direction.

Is it subject to quarantine?—Yes.

In the Mediterranean?—Only a nominal quarantine; they let it be taken out of the ships directly; they order a grating for the corn to pass through, in order that if there is any loose rag, it should be stopped. The practice is this; the ship remains a certain number of days, and if all is well, they discharge the goods; and if there are bags or mats, they are taken out.

If goods which arrive are capable of communicating infection, do you think it possible the expurgators could escape it?—Certainly not.

How many persons are employed on board lazarettos, on an average?—I do not think there are more than half a dozen, besides the master; I cannot say, Government go economically to work.

Would not that number be inadequate to ventilate cargoes from the Mediterranean?—If the cargoes were susceptible of plague, they ought to endure a process that would require more labour.

Do you think quarantine establishments prevent the introduction of the plague?—I have stated that I have no recollection of persons arriving who were infected, and that I conceive it is the only way the plague could be introduced; therefore, inferring from what I have said, I should think no infection could have existed for the last 200 years.

Do you think the plague can exist in this country?—I have stated, that I think typhus fever is the plague in a less degree; I look upon it it is the same disease, only that in Turkey, from the different habits of the people, there it acquires more violence: they live upon fruits, cucumbers, melons; eat very little animal food, and drink chiefly water, which in summer time is stagnant. Constantinople is supplied by water from a lake at a village called Belgrade, about 16 miles from Constantinople, by means of aqueducts, tubes or pipes underground, that were constructed by the Greeks and Romans. In the summer time that lake is very much dried up and exhausted; and the water becomes so bad in the public fountains, that I remember very often the Turks our neighbours coming to beg rain water from our tank; rain water that we had saved.

By typhus fever you mean the typhus that exists in Great Britain?—Yes.

Is that communicable by contact?—If you go into the same atmosphere; but it is not dangerous if the person is removed, and conveyed to where there is a pure air; I have the authority of Dr. Pym, who attends the board of trade.

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Where a contagious disorder is communicated by contagion to a person in a different climate, are you not aware that such contagion usually assumes a more malignant character than in the place where it generated?—I can only answer that as to the observation I have made of the plague in Turkey. I have before stated, that the plague carried from Constantinople to Smyrna very seldom spreads there; consequently I should rather imagine the contrary, that it would not; I beg to be understood as I have stated already.

You are not at all acquainted with the circumstances of the plague at Noya, in Italy, last year?—No.

Do you recollect about 1800 or 1801, there were two or three ships cargoes sunk at the Nore?—I have heard so.

What was the value of the goods so destroyed?—I do not know the value, because that was settled by the Treasury; 10,000 *l.* or 20,000 *l.*; they were under peculiar circumstances.

Were the ships destroyed as well as the goods?—I think they were.

What was the cause of their being so sunk?—I was examined by Mr. Pitt on the subject in general with the Quarantine Committee that were then sitting at the time. The circumstances were these: the ships had loaded at Mogadore, where the plague prevailed to a violent degree, so much as almost to have depopulated the place; and the cargoes consisted chiefly of goat skins, which had been collected during the time of the plague; they were turned with the hair inside, and they were packed in bales. I remember stating, that I conceived if danger of the plague could exist at all in merchandize, it would certainly be in these goat skins, and they were incapable of being opened and aired unless every skin was turned out again, which would have been a very dangerous operation; and therefore as they could not be expurgated by the existing regulations of quarantine, I submitted, that if danger of infection could exist at all, it might not be correct to subject any individual to the process of turning those skins. That was my opinion at the time; and after having discussed the subject, and taken the opinion of the persons supposed to be most competent to judge, the ships and cargoes were ordered to be sent down to the Nore, and sunk in deep water.

What did the cargoes consist of besides?—Gums are what are generally brought from Mogadore; but the principal part of the cargoes were goat skins turned inside out and packed in bales, so that it was impossible to air them. I stated to Mr. Pitt these circumstances, who seemed to be very reluctant to have these ships destroyed.

How many, and what size were the ships?—From 120 to 150 tons.

Three of them?—Three of them; I stated these circumstances to Mr. Pitt, but they were destroyed.

Did Government pay the value?—Government paid the value; I had nothing to do with it, but was sitting with the Quarantine Committee when I was sent for.

Did the value amount to more than 20,000 *l.*?—I should think it would, but I can only speak from conjecture.

Dr. John McLeod, called in; and Examined.

YOU have been brought up to the medical profession?—I have.

In what service?—The navy.

Was you the surgeon of Lord Keith's flag ship?—I was.

What ship?—The *Ville de Paris*. I also went to China with Lord Amherst; and I have served much in tropical climates, and in the Mediterranean.

How many years in the Mediterranean?—I think, altogether five years, from 1808 to 1812, and in 1802 a short time.

Have you seen any case of the plague?—I doubt very much whether I have.

Have you formed any opinion of the plague?—Only from hearsay, and therefore I feel a diffidence in giving an opinion. On the coast of Barbary we had some suspicious cases, on board the *Volontaire* frigate. They were of a very malignant nature, but we soon got rid of them.

Was the fever contagious?—It appeared to be so, for the men attacked were of the same mess.

Was it attended with buboes?—No. I am not sure whether one man had not a swelling in the parotid gland. It was the only fever I have seen, which I suspected of being the plague.

And you consider the disease to have been contagious?—I had no doubt about it; it looked more like contagion than I recollect to have seen before or since. I have not seen contagion existing in the yellow fever, although I believe it may exist.

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Do you consider the Gibraltar fever as contagious?—I was not at Gibraltar at the time of that fever; but I conceive that any fever may become contagious when people are crowded up together; under bad management, without ventilation and cleanliness, a fever will become highly contagious. At the same time, I believe, we have much less to apprehend from contagion than is generally believed. I had lately an opportunity of witnessing a very bad fever at Batavia, where we were under circumstances extremely favourable for the operation of contagion; and yet, although we were very crowded, having been lately wrecked, and at the time huddled together in a transport, yet, by using proper means, such as free ventilation, and doing our best to prevent the accumulation of morbid affluvia, no case appeared to arise from infection: those men who were ill, having evidently become so by sleeping in Batavia, and getting drunk there.

Then, do you think the plague should be considered under the general description of fever?—Certainly. People are said sometimes to die before the usual febrile action takes place, but that does not take away the character of fever which it possesses generally.

Have you ever seen or heard of any thing like the plague in Great Britain?—Never.

To what do you attribute that circumstance?—To the improved state of society. We have had a fever in England resembling the plague, with buboes and carbuncles, as appears in history.

In 1565?—Yes; but the means resorted to on that occasion, like the measures among the barbarians in Turkey and Africa, were calculated to propagate rather than prevent the disease.

If goods were infected with the plague, is it not most probable that they would affect the persons called Expurgators at the different quarantine establishments?—Were the disease capable of being brought to this country by means of goods, many circumstances of that sort must have occurred. This I give as a matter of opinion.

Do you consider the goods can retain the infection and communicate it to other persons?—I can only say as a mere matter of opinion on this subject, that in the place where the plague exists, a man sleeping in the same blanket previously used by a diseased subject, would be very liable to be seized with the complaint; but I believe the blanket might be sent from Smyrna to London, and it would not there be infectious. It appears to me that a sea voyage does not agree with the plague; for the Americans never carry it across the Atlantic; and I believe it would die a natural death or become extinct before it got round Cape Finisterre.

Must not that depend much on the length of the time of the voyage?—No doubt that would have an influence. I can easily imagine that the plague may creep from town to town, by daily importations of infected people coming directly from the sphere of contagion; and in this way it may extend itself to a great distance along a continent, the season and other circumstances being favourable to it; but in 200 years not one instance has occurred of its having lived across the Atlantic, or of its appearing on the coast of England in any ship.

Do you make any distinction between infectious and contagious?—The word infection I conceive to mean the act of transferring disease from one body to another in whatever way it can be done; contagion is receiving disease by the touch alone.

You consider cleanliness and attention to the lazarettos very important, particularly as to the shingle ballast?—Certainly; the shingle ballast I consider a very improper thing.

Do you consider that the quarantine establishments in this country have prevented the infection of the plague?—Surely not; because the plague has never made its appearance through shipping. Quarantine could not certainly have prevented men arriving with the plague on our coasts; and the expurgators, or men employed in opening the goods, must have been attacked by the disease at one period or other, had it been possible to import it in this way.

Do you know of any better mode of treating the probability of the arrival of the plague, than the present quarantine establishments?—I do not know that any thing more is necessary than to inquire of every ship that arrives, whether they are all well on board; and if any men are ill of fever, to treat them as you would other people.

Would you prefer sending them ashore?—I would put them in an hospital, tent or barn, and treat them as rational beings, and not like mad dogs, by cutting them off from society and assistance, and exciting fear and alarm. The depressing passions are much to be avoided. I can see no reason why seamen should be used in the common

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common rigorous way, when they happen to arrive with fever, more than persons in Birmingham and Manchester, where there are typhus fevers prevailing every year. In my own mind it is fully established, that we have nothing to fear from the importation of the plague from the Levant to London; and I ground this opinion upon the simple fact of long and great intercourse, without the disease having once made its appearance by a ship. We have tried the experiment sufficiently long to be satisfied that we have nothing to fear from the importation of goods.

Do you consider the typhus fever a species of plague?—I conceive that almost all fevers have a certain connection; but typhus cannot be considered to have a close resemblance to the plague, for it wants its distinguishing marks, the buboes and carbuncles.

Do you consider it contagious?—I think it is.

Is the yellow fever?—Any continued fever is contagious, where you cram people together; but neither typhus or yellow fever is likely to be so, under good discipline and management.

Have you seen the quarantine establishments in any part of the Mediterranean, or obtained any information respecting them?—At Port Mahon I have seen the quarantine establishment.

Is it very rigid?—Very much so.

Any other place, Malaga?—No quarantine was in force at the time I was in Malaga.

Have you seen the quarantine establishment at any other place besides Port Mahon?—No.

Do you suppose they are in general very good?—From what I saw at port Mahon, and from every thing I could learn, they were very good.

Does the plague, from your information, occur at those places where the quarantine is rigorous?—At Marseilles and other parts, it has occurred, and more than once.

Have you ever heard of the plague in China, or any other malignant fever raging there?—Yes, very malignant fevers, which have cut off great numbers.

You have seen a great variety of fevers in tropical climates?—Not much variety of fever, but I have seen all the varieties of the same fever that could exist. I have seen it at Carthagena, off Vera Cruz, the Havannah, and every part of the West Indies; also on the coast of Africa, and at Batavia. The only difference in this fever, seems to consist in shades of violence proceeding from the constitution of the patient, or local circumstances. It was more inveterate at Batavia, but it was the same fever, and originating from the same causes.

And are you inclined to think the plague may include in the same list of fevers, and originate in the same cause?—It appears to be a fever that generally exists on the borders of the Mediterranean; other fevers do not assume the buboes and carbuncles.

What do you consider to be the cause of the plague?—The cause appears to be the same as that of any other malignant fever, foul effluvia, dirtiness, want of ventilation, and poor living; you may generate in this way, a fever like our gaol fever.

Jovis, 25^o die Martij, 1819.

SIR JOHN JACKSON, BARONET,

In the Chair.

John Green, Esquire, again called in; and Examined.

John Green,
Esq.
(25 March.)

HAVE you known of instances of persons having slept with others, and not having taken the plague?—Yes, Mr. Slaars, a Dutch merchant at Smyrna, had two daughters who slept together; the one was taken ill, and the sister continued to sleep with her; at last she died, and upon examination it appeared that she had had the plague; they found the buboes on her; the sister did not take it, nor did any of the family.

Do you know of any other instance?—Yes; Mr. Perkins, an English merchant at Smyrna, had two daughters who also slept together; one of them was taken ill; it appeared that it was with the plague; she got well of it, and the sister did not take it, nor did any of the family.

John Green,
Esq.

(25 March.)

What is the mode of shipping goods at Smyrna; is there any difference made whether or not there is plague there?—None at all.

Prior to 1800?—The mode of shipping them was always the same.

Prior to 1800, what was the practice and precautions to prevent the plague being shipped in vessels for England?—Previous to 1800 English ships were not permitted to come direct to England, without a clean bill of health.

What was the practice that prevailed when they had not a clean bill of health, where did they quarantine; did English ships that sailed for England with a foul bill of health quarantine?—In some instances; not very frequently. English ships loaded at Smyrna during the plague, and went to Malta or Leghorn to perform quarantine, and afterwards shipped the same cargoes on board them to England.

Since 1800 there has been no distinction, whether plague or not?—In the year 1800 an Act was passed, permitting English ships to come directly to this country without a clean bill of health.

Were not the quarantine laws in this country, in consequence of that alteration, more rigidly enforced?—There was a general revision of the quarantine laws in 1800; a committee was appointed for the purpose of making a report upon certain questions specifically put to them by the Privy Council; the Privy Council afterwards formed regulations respecting quarantine generally, including ships coming without clean bills of health.

Under the form of regulations which prevailed before 1800, is it not probable that the plague was seldom if ever shipped for England from the Levant?—I cannot speak as to the shipment of the plague; I can speak specifically, that the same species of goods had been for a century brought to this country from Smyrna, during the plague, by ships bound to Holland, and from thence the goods were brought here; they have no quarantine establishments in Holland, consequently it was tantamount to their having come direct.

Did the same regulations you state to have prevailed prior to 1800, prevail in other parts of the Mediterranean, and in Turkey generally?—When I speak of Smyrna I mean Turkey generally.

I think you stated, there were very few of the bales that arrived in England, opened?—The bales were opened after they came here, not in my opinion as they ought to be; since 1800 they were ordered to be opened from one end to the other, and exposed for fourteen or fifteen days.

Are all opened?—They ought to be.

I understood that very few were?—That was previous to 1800.

Do you consider that all are opened now?—I conceive they are, for the order in council is to that effect.

Are there men enough to open them?—Yes, a knife will do it.

But then they have to sew them up again?—They have to sew them up again; they are cut from top to bottom. The external part can be exposed to the air, but the inside cannot; they are ordered to put their arm in and to rummage the bale to find the plague; I have not discovered that they have found it yet; I believe it must be generally admitted that it has not been found.

Do you consider that they have generally opened all the bales?—I have no reason to suspect that they have not done their duty.

And it is quite practicable for them to do it?—Certainly.

Though there are so few hands, only six?—I am not prepared to state the number under the direction of Government. It is customary at Smyrna for the crews of the English ships to fetch all the goods from the shore on board their own ships; they stow them in the hold, and they unstow them afterwards when they come here; but I never heard of any instance of any of them taking the plague.

Sir Arthur Brooke Faulkner, called in; and Examined.

Sir
A. B. Faulkner.

STATE the opportunities you have had of considering the plague, and the nature of contagious distempers in general, in the course of your practice?—The only opportunity I have had of seeing the plague, was in the Island of Malta.

On what occasion?—In the year 1813.

When the plague prevailed?—When the plague prevailed in the island.

What situation at the time did you hold?—I was physician to the forces. I was the only staff physician employed during the greater part of that service.

Was you there at the time it broke out first?—I was.

And attended as a medical man during the whole course of it?—Not during the whole

whole course. I did not attend officially until the army became infected. I was not permitted when the natives only were infected.

But you was present?—I was present during the whole period of the plague.

And practised as one of the principal men of the army?—After the army became infected, I practised as physician to the forces.

What is your opinion respecting the mode in which the plague in general, is generated and communicated?—I believe it is generated or produced by a contagion, *sui generis* quite peculiar and specific, and that it is communicated only by contact or close association with the person or thing infected.

What are your reasons for believing that it is communicated only by contact or association, and not by a certain state of the air?—My reasons are drawn from the course the plague took from its first entrance into the Island of Malta, until its cessation. It was communicated in the first instance in the direct line of contact. It could be traced to have been propagated in the direct line of contact, in the city of Valetta, and from the city into most of the cassals or villages, where any history could be obtained of its introduction.

Will you have the goodness to state the instances of its communication by contact, during your own experience at Malta, from your own knowledge?—The first case of the communication of the plague, was, in my opinion, from a vessel the San Nicola, in the harbour, to the family of a person of the name of Salvator Borg.

The vessel lay in what harbour?—It was lying in the harbour contiguous to the city of Valetta; the harbour is called Marsamuchetts.

State the circumstances?—To prove that it was from this vessel the infection was received, I shall crave permission to read a letter addressed by myself to the governor. I am not quite sure of the verbal accuracy of the letter. After the vessel arrived in the harbour in March, the whole town became extremely alarmed, and among the rest myself. I understood, but this I cannot pretend to vouch for, that several merchants had remonstrated against the vessel remaining in the harbour. Participating in the common alarm, I thought it my duty, though not called upon in my official situation, to represent the consequences that appeared inevitable in permitting the ship to lie there; and therefore, though not solicited, I communicated the following letter to the governor:

“ Sir,

10th April 1813.

“ ALTHOUGH in offering the following observations relative to the means of preserving this garrison from the calamitous distemper with which it is threatened, I should not be altogether able to elude a charge of intrusion upon the province of the health officer, yet being the only physician to His Majesty's forces on this station, I trust your Excellency may be pleased to see, that the contribution of my opinion at such a juncture (though it has not been called for) is not unjustifiably at variance with my duty. It was my intention to have had the honour of addressing your Excellency on this subject some time ago, and previous to the malady being reported to be so close in our vicinity. The melancholy fate of the surrounding countries which have lately fallen a prey to its ravages, left in my mind no doubt as to the expediency of such a proceeding. My purpose was, however, for the present over-ruled by certain of my friends, who could not be brought to believe, that the evil was in the least likely to approach so near to ourselves. If credit can be placed in the report of the day, these expectations have proved illusory, and therefore I can no longer apprehend that my addressing your Excellency on this subject should be deemed improper. I shall consequently hasten to submit for your consideration a proposal, from which, obvious as it certainly is, I am led to think considerable advantage might still be derived for the protection of Malta against the introduction of plague. With this view I would suggest, that neither the harbour of Marsamuchetts, nor the island there usually allotted to quarantine, should, upon the present emergency, be accessible to any arrivals from suspected ports; and therefore that some more distant, yet commodious place be sought out, which, after being insulated from all intercourse with the population, should, exclusively be destined for the reception of all persons with any suspicion of the disease. Some information which I have lately received, will not allow me to doubt, Sir, that such a place may be found; and that the vessels, cargoes and crews of infected ships, could be disposed of in such a secure manner, as to allow of the least possible risk. Unless called upon, I will not trouble your Excellency with any detail of particulars, by which my proposal might be carried

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into effect. Whether the apprehensions about the existence of plague in our vicinity, be sufficiently founded or otherwise, I cannot resist conviction that the measure I have been proposing, would in time of such peril, have been at the first of much importance. Assuming as a fact, that there exists no longer any reason to doubt that the disease has made its appearance in the neighbouring quarantine ground, the dangers arising from the extreme proximity of that situation to so many adjacent shores, and to so very populous a neighbourhood as this, are, in my humble judgment, too obvious to require comment; since the points of invasion by so formidable an enemy, are thereby so much more multiplied. How awfully has the experience of other times informed us, that in this and in similar situations of exposure, the plague has found its way, in defiance of the most vigilant regulations. It is this reflection which has chiefly prevailed with me, to submit the above proposition to your Excellency; by the *prompt adoption* of which it appears to me, the best chance would be afforded of checking the approaches of a calamity, which even a little delay might baffle the best efforts to oppose. I hope, Sir, the urgency of the occasion will atone for any imperfections in this letter attendant upon haste and anxiety; and that you will believe me, with the most zealous concern for the interests of His Majesty's army, and the people here committed to your governance,

"Your Excellency's most obedient, &c. &c.

"A. Brooke Faulkner,

"Physician to the Forces."

Such was the letter I had the honour of addressing to the Commander in Chief.

Go on with your detail?—My apprehension of the disease finding its way into Valetta, from the lazaretto and plague ship, arose from my knowledge that the persons appointed as guardianas, were taken from the lowest part of the community, and paid, as it appeared to me, very inadequately, somewhere from 1*s.* 6*d.* to 2*s.* a day; and having recollected from reading the history of a plague that visited the same island in 1675, that it crept on shore from an infected vessel unobserved, I thought I was justified in entertaining the same fears on the present occasion. Accordingly on the 16th of this month, six days after this letter was presented to his Excellency Lieut.-Gen. Oaks, the first infected case occurred in the town of Valetta; it was the case of the daughter of Salvator Borg. She died with well marked symptoms of the disease, I think on the 19th April. Two other persons of the same family died on the 2d May, all with well marked symptoms of the disease.

Will you trace the communication between them and the vessel?—From the family of Borg it made its way in a direct line into the family of one Maria Agius, a school-mistress, who, together with others she immediately communicated with, were attacked by the plague, and all of whom (with some of her scholars, I heard) were seized or perished with well-marked symptoms of the disease. I ought to revert to that part of your inquiry, which is of most consequence, namely, the communication between the vessel and the town of Valetta. I hold it as hardly requiring proof, that the disease should have found its way from an infected ship in the harbour, when I consider the apparent connection between the cause and effect, arising out of the arrival of the vessel, and the almost immediate verification of my prediction to the governor; and recollect besides, that the island had not been infected for 130 years before. I consider these circumstances as conclusive. But, in the next place, some new linen was discovered in the house of Salvator Borg, which was confidently rumoured to have been brought from the infected vessel; and it was further stated, but of this I have no certain authority, that when the vessel returned to Alexandria, the infected place from whence it came, there were some bales missing.

Have you any reason to believe that the family infected, among whom the disease broke out, had direct communication with the ship; and what means have you of knowing it?—When I consider what appeared to me the imperfect state of the quarantine system at Malta, I can only say, I think it an event not improbable that some of the family might have got goods from this vessel.

Can you state that any communication took place, and what, between the family of Borg and the family of Maria Agius, where the disorder next appeared?—The families of Maria Agius and Borg were intimately acquainted with each other, and she was constantly employed in relieving the afflictions of the latter when taken ill of the plague.

From the family of Agius could you trace the progress of contagion to any other family?—For my own part I dropped the inquiry there; the *foci* of contagion became

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so rapidly multiplied, that it appeared to me impossible to carry the investigation in a direct line further in that populous city; but I am in possession of documents furnished to me by one of the captains of the lazaretto himself, a man of strict integrity, and many years employed in that official situation, showing, that the contagion made its way in a direct line from Valetta into most of the infected cassals or villages: these documents I can produce if required. In the next place, in pursuing the course of the disease by contagion, I should beg leave to remark as a very important circumstance, that the means of its communication to the small contiguous island of Gozo, at a late period of the calamity, can be distinctly made out. A man belonging to an infected family in one of the cassals, made his escape with a box of clothes into a neighbouring cottage; it was speedily found out that he had escaped, and he was accordingly apprehended and sent to the lazaretto. On his enlargement from the lazaretto, he returned to his cottage where he took this box of clothes that had never been suspected to be there, but had been concealed; and he hired a boat and carried this box of clothes to the island of Gozo. The first family infected on the island was the family at whose house he arrived, and to which place he carried the box of clothes. It was a marriage present, I understood; and a priest acquainted in the family, was one of the first victims; he died with well-marked symptoms of the plague. I have not had it in my power to trace the direct communication further.

Did the individual who conveyed the clothes take the plague; was he himself infected?—I am not prepared to answer that question, but I rather think he was; many persons were not infected by the disease, that were taken from the very bosom of those families, who all died of it.

Do you happen to know whether this person had communication personally with the individual who took the complaint, as well as by giving the goods?—He lived in the family; there was a marriage about to take place, or had taken place, in it.

How long after he got this box of clothes was it before the disease broke out?—Within a short time.

What length of time were the clothes locked up in the box, between the time of their being infected, and the box being opened, and the clothes given to the people in Gozo?—During the term of his quarantine, I believe somewhere about 20 days; I am not quite prepared to answer when it was opened. All I can say is, that the box was carried by this man to a cottage, and was concealed from those who went to take him to the lazaretto.

Do you know whether any person in the cottage, where the box was deposited, took the plague?—I cannot answer that question.

Do you know whether there was any communication, any thing that could have conveyed the disorder from the ship San Nicola to the family, except the linen?—I am not aware of any thing; I rest my whole evidence on what I before specifically stated, namely, the tendency of the disease to propagate in a direct line, and the circumstance of my prediction being followed in four or five days by its consummation, and the collateral consideration of the island not having been infected with the plague for 130 years.

And you conceive that to have been a sufficient cause to account for the propagation of the plague?—I should think so. I beg to be understood in giving this evidence, that I was not present myself, and therefore I cannot speak with confidence as to the linen being found in Borg's house; I did not see the linen myself. As to the other circumstance of the disease propagating in a direct line to the cassals, I had the documents from one of the captains of the lazaretto.

You have stated, that in the family of Borg, and in that of Maria Agius the schoolmistress, and also in the family in the island of Gozo, the different individuals died with well-marked symptoms of the plague; do you state the well-marked symptoms of the plague to have appeared, from your own individual knowledge, or from information derived from others?—From information derived from others. With respect to the first case, I had official information communicated by the head of my department, I received an official letter from him on the subject. With respect to Maria Agius, it was a fact so notoriously known, that I apprehend any evidence on this point would be unnecessary. With respect to the infection of the cassals in a direct line, my evidence, as I have stated above, rests on the written statement of one of the captains of the lazaretto, employed in the service during the plague of Malta.

Is he a medical man?—No; it is not necessary he should be so to fill that office.

With respect to Gozo?—With respect to Gozo, I have the information of some respectable authority, but I do not recollect his name; it is, however, a well-known fact.

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Then, in point of fact, not one of these cases, in which you state the symptoms to have existed, was from your own personal observation?—Not one. I was not officially employed; I offered my services in the native hospitals; but they were not received, on this ground, that they might be wanted for the army.

Had you any intermittent or other fever at Malta, during the plague?—I had none under my own immediate eye or care; but I understood there were a few, and those very mild, principally occurring, or indeed altogether occurring, towards the autumn or the latter end of the year 1813; but as I have not seen any of the cases, I can only speak from hearsay.

Did those instances occur before the plague broke out?—They had, I understood, been occasionally numerous in preceding years.

The instances you state to have prevailed before the plague broke out, were they the marsh fevers?—I am not aware that any had occurred the year before; *i. e.* I cannot specify, myself, on my own authority that any occurred the year before; but I understood that they were of frequent occurrence in every year.

Was the plague particularly prevalent in the places where the marsh fevers prevailed?—Not at all particularly prevalent where the marsh fevers were most generally produced.

Is there any similarity between the marsh fever in Malta and the plague?—I never could trace any series of symptoms that could lead me, in the slightest degree, to suspect any identity between them; but I have known the plague to personate in certain symptoms almost every possible form of fever, and I have known it to be entirely free from every kind of fever; there is no certain type to which it can be affixed.

Do you mean to say, that there is no distinct symptom that marks the plague as distinct from every other fever?—I do mean to say, that fever is not an essential attribute of the plague; it is frequently mortal where there is no fever. It is an extraordinarily anomalous disease, which defies (I should rather say, has almost defied) definition. Dr. Cullen, I conceive has defined it best; but even his definition is not a correct one. In fact, I may say, it has hitherto baffled nosologists scientifically to define it.

Are there not symptoms that distinguish the plague, in a manner which cannot be mistaken?—There are symptoms which are sometimes called characteristic symptoms, but they are not constantly present. The most frequent and constant symptom was a peculiar cast of the eye, and a certain appearance of the tongue; the eye had the appearance described by Russel, of a muddy dull colour; I believe that to be the most frequent and most characteristic symptom of the plague. As to buboes, carbuncles, and appearances on the skin, they are not constant. In many of the most fatal cases, the patient perished before the buboes or any other eruption made their appearance; many without any other appearance than that of the eye.

What was the state of the pulse?—The pulse had been felt occasionally, through a tobacco-leaf, and was in many instances extremely rapid. The fine for feeling a pulse was several days quarantine; if any medical man had felt a pulse he was subject to this quarantine.

Can you show that prompt separation has been effectual in securing persons from contagion?—I can, in many instances; the instances would be difficult to detail, they are so numerous.

Did the disease extend to Sicily, or the neighbouring islands?—It did not extend to Sicily, in consequence of the prompt precautions that were adopted: and had there been the same at Malta, my persuasion is, that the disease would have been resisted *in limine*.

Were quarantine restrictions found effectual in resisting the plague at Malta?—Wherever proper quarantine restrictions were imposed with firmness, steadiness and promptness, they seemed to be altogether effectual in preventing the extension of contagion; but the quarantine system seemed to me so extremely lax from the beginning, for several months, that it would have been next to impossible the disease should not have been widely disseminated through the island. I may enumerate as instances of this laxity in our quarantine system at Malta, that there was no complete *census* taken of the population, with a view of detecting cases of infection, until, I think, the 19th May 1813. There was not a complete and sufficient corps of trusty guards until the month of August; the people were not shut up in their houses until, I think, the month of August; that is, not universally shut up, probably partially. It is notorious, that contact constantly took place in the street, previous to the organization of this corps of guards, and the shutting up of the inhabitants

inhabitants in their houses; I have official documents to prove all these points I have been just stating.

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Was the plague ever known to be received in the lazarettos?—It has been known; I have heard many instances related to me by the Maltese, and here is evidence of one; I have brought the title page of a book, which represents a monument raised to the memory of a grand master, for having arrested the disease.

In what year?—1743.

Do you know any thing of the introduction of the former plague, that ravaged Malta, and when did it occur?—I beg to refer to a paper I published on the disease, during my engagement, on the plague at Malta, which was communicated to the Edinburgh Medical and Surgical Journal, and published 1st April 1814. The passage I wish to read to the Committee, is this: "It is somewhat remarkable, that the history of the introduction of the plague, when it made such great ravages on the last occasion on the island, about a century ago, was nearly similar to what is circulated of the present; being attributed to some linen brought from a Levant vessel, by a Maltese shopkeeper; which, after producing the disease in all those who first came in contact with it, ultimately disseminated the malady throughout the whole population."

During the late plague at Malta in 1813, was the disease arrested when the quarantine system was rigidly acted upon?—It was: from the moment that an adequate and a regularly organized police was established, and the inhabitants shut up in their houses, and other strict measures of quarantine enforced, (which was the case at a very late period) in the month of August, the plague did rapidly decline.

How was the disease stopped at last?—By what I have just stated; by the organization of a sufficient corps of trusty guards and police restrictions, and by shutting the inhabitants up in their houses. I could name a number of other circumstances connected with the means of preventing it.

How were the medical attendants preserved?—With respect to the military hospital, of which I can speak from experience, the hospital in which I attended, (the pest hospital,) they were, in my opinion, preserved by wearing a dress of oiled silk, which prevented the possibility of any contact of infected matter with the skin, and probably also by its promoting free and copious perspiration, and in consequence preventing absorption.

When was the plague stopped; at what time?—I am not quite sure whether it was in December.

Can you state when it began to decline?—It began before the month of August.

What do you conceive the hottest period of the year at Malta?—I am not prepared to answer that question; I believe the month of August. I have kept a thermometrical table; but having it only for one year, the results of my observations are probably insufficient.

What was the temperature of the atmosphere at the period when you conceive the decline to have been apparent?—The 16th July appears to be the day when the plague was at its height; 67 died that day; the thermometer was at 81, at four o'clock in the afternoon. In the morning at six o'clock at 77, and at 10 at 81½. The next day, 36 died; the thermometer was at 82, and in one part of the day at 83. On the 18th of the month, 50 died; the thermometer was in the course of the day at 81. On the 29th 41 died; the thermometer was at 79. On the 20th of the month 43 died.

State the period at which there was a sensible decrease?—I think from the 16th of July there was an average decrease, though a very irregular kind of decrease; but the thermometer was rather higher than lower.

How far was the establishment of the police precautions to which you have alluded, coincident with the decrease of the plague, with the visible decrease of the plague?—This question requires a cautious answer. The gentleman appointed at the head of the police, begun to organize his system on the 3d July; the disease extended its ravages after he had organized his system in some degree; but it was not perfectly organized till the 2d August, *i. e.* it did not shut the people up in their houses, nor was there an absolute prohibition of contact; but as soon as it did enjoin absolute prohibition of contact, and shutting the people up in their houses, the disease declined.

Then it appears the decrease was not very visible till these precautions were put strictly in force?—Not so visible.

State from the period at which they were strictly enforced, namely, the 2d August, what was the average decrease from that time?—On the 2d August 50 persons died, on the 3d August 48, on the 4th 27, on the 5th 47, on the 6th 43, on the 7th 35, on

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the 8th 37, on the 9th 24, on the 10th 26, on the 11th 28, on the 12th 26, on the 13th 31, on the 14th —

Instead of putting the result of every day, look at your table and see when the decrease became considerable?—I have brought it down since the 16th July until 14th August, to less than one half; I have brought it down to 31 instead of 67, in less than a month.

From the 16th August did it go on gradually decreasing, till it disappeared?—It went on decreasing on the average, but not regularly.

At what period did it finally disappear?—On the 19th October; in my note of this day is stated the last occurrence of a case of plague in Valetta.

Did it continue in other parts?—In some of the cassals for a considerable time.

Have you any doubt whatever, that the decline of the complaint was produced by the prohibition of intercourse among the inhabitants?—I feel satisfied that it was very much owing to the prompt measures of police; and my reason is, that the thermometer rose inconsiderably in point of fact, while the disease was decreasing fast.

Is there any other cause to which you can attribute the decrease and cessation of the plague?—I really do not see any other cause.

In your observation of the plague, has it appeared to you that it subsists only in a given temperature, neither in very great heat or very great cold?—During my residence at Malta it did not appear to me that the temperature of the air had any thing to do with it. In my own opinion, I do believe that a very high or a very low temperature would check it.

Will you state the opinion you entertain, from the best sources derived, what degree of heat is not consistent with the plague?—I can only speak from my reading, on that point. I believe that materially below 60 or probably at 60 degrees of heat it cannot subsist; but it is bare conjecture.

You had never any opportunity of observing the plague except at Malta?—No.

Was there any thing remarkable in the state of the thermometer at the time the plague broke out at Malta?—Nothing, I believe.

What was the temperature at that time?—The thermometer, on the day the first case was reported to have taken place, was at 64; that was on the 16th April.

What was the state of health on the island, before the plague broke out?—To the best of my knowledge nothing remarkable. If there was any thing remarkable with regard to its climate, it was that there was nothing very remarkable, for the people were wondering that there was nothing remarkable in the state of the air to produce plague; there was nothing anterior to the breaking out of the plague, at all leading to any reason why it should exist unless by contagion.

At what time did the first case of plague appear among the soldiers?—Without referring to my official letter I cannot exactly state.

What month was it?—In June.

Was the soldier who was first attacked with plague, in barracks or quartered in the town?—I shall be under the necessity of consulting my medical register; but I have no doubt he was in barracks.

Could any communication, personal communication, be traced between the soldier first infected and any other soldiers who were afterwards infected?—I do not know that any had been attempted to be traced; for when soldiers live in the gregarious manner they do, it would be in vain to make the inquiry.

Were the soldiers kept within their barracks, previous to the appearance of the plague among them, and their communication with the inhabitants prevented?—In some of the barracks it was prevented, in some not; and it is material in order to prove the contagious property of the disease, that in those barracks where a strict quarantine system appeared to be kept up, the plague was excluded, though they were in an unhealthy part of the town; whereas in other places that were more elevated and airy, but where there seemed not to be the same precautions observed, the disease was brought in.

Then the soldier first infected was in one of those barracks that had a more free communication with the town; had you the charge of the sick in the barrack in which the first case occurred?—I had partly the charge of them in this barrack, but not in the first case.

When did your charge of the plague patients commence?—It was relative to that point I wished to consult my register; but as far as I can state with confidence, I was not employed officially to prescribe till De Rolle's regiment was infected. I think I was called in to see some other cases, but I had them not under my charge.

Were you yourself, in attending the sick, those who were ill of the plague, in contact with

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with them?—Personally close to them, as nearly as it was necessary for me to approach them.

Had you the plague?—I believe not; though I have some doubt respecting that.

Who were the persons employed under you in the care of the sick?—Orderlies and such like.

Did any of them catch the plague?—Not one.

Were they necessarily in contact with the individuals who had the plague, and with their clothes and bedding?—Necessarily.

Were any precautions taken with the view of preventing them from catching the plague, in the discharge of their duties?—Oiled silk dresses were enjoined by command to be worn by every person in attendance about the sick.

Was it complied with?—It was I believe, in point of fact; they were also enjoined a prompt ablution after touching the infected, they were obliged to wash their hands; in short every means were adopted to prevent their catching the infection, with the addition of ablutions.

Was one of the precautions rubbing the body with oil?—It was; but there are the best reasons for supposing that it had no share in preventing the infection.

What reason?—It had been employed with all the attention possible in the garrison; but yet the disease made its way. It had been employed by those who attended in carrying out the dead, and who I believe almost all perished; there were very few instances of such persons who did not perish.

When you describe the plague as contagious, do you mean that it is communicated by the breath?—I am not prepared to say whether it may not, by closely inspiring the breath of an infected person; but this in my judgment is a kind of contact. My opinion is, that it is principally communicable by the touch, but I think it can be communicated in the former way also; few would be hardy enough to try the experiment.

If it can be communicated by the breath, how can wearing oil-skin dresses or ablution prevent the breath of the infected persons getting into the mouth or nostrils from the infected?—We know, that at a certain distance in other diseases, the contagion from fomites may be so diluted by the atmosphere as to become innoxious.

Was the progress of the plague among the troops rapid?—It was not rapid.

Not so rapid as among the inhabitants?—Not at all; in all not above 20 I believe died up to the middle of October.

The progress of the disease I mean?—In some it was rapid, and in some it was not: there was every variety.

What was the per centage of those in garrison attacked?—I am not prepared to say.

Was it a greater or less proportion than the inhabitants?—A less proportion.

The precautions applied to the troops were more rigid than those that could be applied to the population?—Certainly. I was going on to state some circumstances as to the degrees of precaution used in each of the military barracks. The Sicilian regiment, though situated in a very infected part of the island, a place called Florian, escaped by the promptness and vigilance of Col. Rivarolla. De Rolle's regiment, which was in the healthiest spot, was invaded by the disease, and evidently in my opinion in consequence of their barrier admitting a contact with persons on the outside. It was a barrier at which you could shake hands with any body on the outside. In the 14th regiment, which was near the most unhealthy part of the town, there was but one person suspected, and his disease was immediately arrested; the public prison and public general hospital escaped. The convents in Valetta escaped, with the exception, I believe, of one; and the introduction of the disease to that one was accounted for. The prison and these public institutions escaped, I conceive, very much by the voluntary attention paid by their inhabitants to a strict system of quarantine.

Did the plague cease in the military hospitals before it ceased in the town?—I am not prepared to answer that question.

Were the soldiers in barracks prevented from holding communication with the town, after the plague had ceased in the barracks?—I believe so; that would greatly depend upon the commanding officer.

I ask you, whether in point of fact, they were?—Throughout the whole they were interdicted as far as possible; the commanders of regiments issued orders to prohibit intercourse, but they were not strictly obeyed.

Did the plague find its way into any of the barracks or regiments, where these orders were not strictly observed?—It got into De Rolle's regiment particularly.

You have stated, that these three cases of Salvator Borg, Agius and Gozo, were

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cases you received from information; now I observe in many cases that came under your own knowledge, it did not communicate to persons; do you not consider that the natural time of the decrease of the plague is the fall of the year?—It is my own opinion, that it would cease if the temperature was low; I think that the plague is incompatible with a certain temperature, high or low.

Then it is not the particular period of the year?—No.

You stated it to appear prior to August, but the restriction was not till the 2d of August?—Not in its full rigour, but an improved system was acted upon in July.

The ship Nicola returned to Alexandria with her whole cargo, did she not?—If I may except those bales which were rumoured to be missing.

She was not allowed to land her cargo?—No.

Who navigated her back?—Probably the remaining part of the crew.

Was she not navigated back by Maltese?—She might.

Do you know whether they took the plague?—They arrived in safety.

Did they who assisted in landing the cargo?—I believe so.

Are there any eruptions in the skin, in the plague?—If we can call eruptions, what are termed blains and carbuncles.

Do you consider a buboe or carbuncle to be an eruption?—I should think so; it is freely applicable to the term; its etymology is from *erumpo*, which is to break forth.

Does not eruption mean a cluster of pimples?—In common acceptation it may.

Do you think the plague comes under the description of Exanthemata?—I think it does; I believe that Dr. Cullen has given the best account of the disease.

You have stated, that the contagion in plague is what is called *sui generis*, do you consider it different from contagion in the small-pox?—Different from every other known contagion.

Have you ever heard of the plague in England?—I have read of it.

In what year?—The last was in 1665.

Have you ever heard of plague since?—Never, as imported into England.

Do you consider the plague can be propagated from goods as well as persons?—I think so.

Have you any reason for thinking why the plague has not been introduced from goods in the quarantine establishments?—In the first place, quarantine restrictions since 1709 have been a great deal more rigid; indeed they did not exist in England at all, previous to that period. I conceive that the intensity of the contagion may have been greatly blunted by the length of the voyage, and the length of time that passes after the shipment of goods. Besides we know, that other countries have a good system of quarantine, which is in favour of the plague not being imported here.

Do you consider the plague of 1665 to be the true Levant plague?—From the description I have read of it I am inclined to think so.

Do you consider the reason why the plague has not been introduced in England, has been more from the length of time in the voyage, than the quarantine establishment?—I mean both conjunctively, viz. the time and the means used to free goods from contagion, and to expurgate infection.

How do you account for the expurgators never having taken the plague?—I cannot account for that, but by collateral considerations.

What are those?—1st. That we have observed, in other countries the disease has not taken place for a long series of years, not for 130 years in Malta. 2dly. We do not know what the circumstances are that constitute aptitude in the receiver, sufficiently, to know why the plague has not been received into the lazarettos since 1665. But 3dly, it does not follow because it has not been received into the lazarettos since 1665, that it may not by some fortuitous concurrence of circumstances occur again here.

Are you acquainted with the opinion of the ancients, respecting the plague?—I am. It has been stated, that the ancients were not acquainted with contagion, but I can adduce instances from the medical writers and the poets, to the contrary; I can produce instances from both the Greek and Roman writers and poets.

Does Hippocrates mention it?—He does not. He had not the experience to determine the point; but with respect to the authorities that do speak of contagion, I shall beg to refer to the following, viz.

Συνδιαρίκειν τοῖς λοιμώτευσιν ἐπισφαλές ἀπολαύσαι γὰρ κίνδυνος, ὥσπερ ψώρας τινος ἢ ὀφθαλμίας.—Galen, lib. 1, ch. 2. de different. Februum.

Διὰ τί ἀπὸ μὲν νόσων ἐνίων νοσῶσιν οἱ πλησιάζοντες, ἀπὸ δὲ ὑγείας εὐδὲς ὑγιαίνειν;

Aristotle, Probl. lect. vii. 1.

Δέος.

Δέος δὲ ξυμβιβῆν τε, καὶ ξυνδιαίτασθαι, ἔ μιν ἡ λοιμὴ· ἀναπνοῆς γὰρ ἐς μελάδοσιν, ῥηϊδίῃ βαφῇ.
Aretæus de Elephantiasse.

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Infecti quasi valitudine et contactû.—Annal. Tacit. b. 6 & 7.

Postea curatio ipsa et contactus ægrorum, vulgabat morbos.—Liv. 25 & 26.

Contagion is clearly expressed in the last eight lines of the third Georgic of Virgil; likewise in the first Bucolic, verse 52; where these words occur:

Nec mala vicini pecoris contagia lædent.

There are numerous other authorities.

Veneris, 26^o die Martij, 1819.

SIR JOHN JACKSON, BARONET,
In the Chair.

Sir Arthur Brooke Faulkner, again called in; and Examined.

Sir
A. B. Faulkner.

(26 March.)

I THINK you wish to add to your answer respecting the air of Malta?—I was observing, that a high wind, from whatever quarter it blew, was always accompanied with some increase of the number of infected.

Can you give an undoubted proof of the contagion of plague, from any fact that came under your own eye or personal knowledge?—At the military barracks I think, certainly.

What was it?—The attacks being *consecutive*, as from contact, instead of being *simultaneous*; it was impossible to trace immediate contact with an infected person in barracks, where soldiers were so much together, and lived so gregariously.

If the air was the general cause of plague, must not that have operated as the cause, in the instance to which you have alluded:—Certainly not; if the air had operated as the cause, the disease would not have extended consecutively, as I have shown to be the case, but would have been produced through the corps simultaneously; the same would have happened through the population of the island, especially as there were several parts of the island, from local circumstances affecting the air, more exposed to contamination than Valetta.

Is Valetta a lower part of the island than the other parts?—I am not quite sure respecting that; but it is universally allowed to be one of the most healthy parts of the island, the most free from marsh fevers; and as an instance, I may mention, that in 1801, when marsh fevers were very fatal and numerous, Valetta entirely escaped.

Was there any fever except on board the San Nicola, at the time?—I cannot speak with positive certainty, but I think it not unlikely, as vessels from Alexandria, an infected port at that time, were not excluded from entering the harbour contiguous to Valetta.

Whereabouts was Salvator Borg's house?—In Strada St. Paulo.

Is that far from Valetta?—It is in Valetta.

Is Valetta the fort?—It is a considerable and well fortified city, the largest in the island; it is the last spot where one would look for marsh fevers or diseases of any kind, being perflated with pure sea air in every direction, and the soil being perfectly dry.

Would not the numerous instances you have alluded to, of persons having escaped the plague who had come from the bosom of families afflicted with it, be an inducement, if not a proof for deeming plague not contagious?—Neither an inducement nor a proof; for we see in other diseases allowed to be contagious, the small-pox for example, that many such escapes have taken place.

Have you any better proof for deeming plague contagious, than the preceding observations on my question for deeming it not contagious?—I think that when the whole evidence I have given, respecting the propagation of the plague in a direct line, be well weighed and considered, and when we see that any other supposable cause than contagion is inadequate to account for such extension of the disease in a direct line, the proof is made out as far as presumptive evidence can well render it.

Do you know how many died of the plague in the harbour?—None in the harbour;

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two I believe died on their passage to Malta from Alexandria, and two died in the lazaretto after the infected crew were sent on shore.

You know the ship San Nichola was sent back to Alexandria, without unloading, from Malta?—It was notoriously stated.

And do you know that the goods were landed at Alexandria, and none of the persons took the plague who went with her?—I believe none of the persons who navigated her back took the plague, but arrived in perfect health; farther I know not; I know nothing of her unloading; I have said, there was a report that some bales of goods were missed, but I only speak from public conversation.

Is it not more likely that the persons who went with her to Alexandria should have received the plague, than that a bale of linen carried into Malta from her should have produced the plague?—The ship had undergone a very considerable quarantine; and I heard that means were taken to prevent her from infecting those engaged in her navigation.

Do you suppose her goods were unladen?—I believe not; in every other respect as far as circumstances would admit, without unloading, I have heard she was expurgated from infection above decks, but I am not certain of this.

Do you believe it would be possible to ventilate the goods, without unloading them?—I think it would be impossible.

What number of military were at Malta in 1813?—To the best of my recollection, about 4,000.

What was the greatest number of military afflicted with the plague, at the same time?—I am not prepared to answer, as the returns of the whole army were never in my possession; but I can speak as to those under my own care; I have the return of them in my pocket: 4th July, the first case was placed officially under my care; the second was the 8th July.

What is the greatest number at any one time?—I beg to read the return; the third case was the 20th July, the 4th case the 21st July, the fifth case the 21st July, the sixth case the 23d July, seventh 25th July, the 8th case is the 28th July, the 9th case is the 2d August; I believe that is the last officially under my care.

The sick of all the persons were under your care?—Not of all the forces; some of them were attended by their own regimental surgeons within their own barracks; those sick only properly belonged to me officially, that were sent into a general hospital, although I did attend also in the regimental hospitals; we were at one time so ill off for a general pest hospital, that medical staff officers were under the necessity of attending plague cases at the barracks under canvass.

Have you any recollection of the number of soldiers altogether taken ill of the plague?—In all, our army had not hitherto lost above 20, up to the date before mentioned.

What date?—Up to October,

Were any taken ill after that?—I believe some solitary instances occurred after that. We lost very few in all.

Was any medicine administered which was successful in these cases?—Some articles seemed to be very successful, but there could be no dependence placed upon any.

Would you like to mention any?—Those which I found most beneficial were the cold affusion and turpentine; to which of the two it is difficult to ascribe the good effects.

Did you use mercury?—I did.

Blood letting?—Yes, by leaches, topical blood letting. Camphor I also used, and several other medicines. Calomel was reported to me as having done some good under the care of the garrison battalion surgeon, but I never found it myself of any use.

Of those infected with the plague, how many do you suppose recovered among the soldiers?—I can only speak as to De Rolle's regiment; I think nearly one half.

Was there any plague at Sasi?—None, nor at some other cassals in the island.

To what do you attribute that?—To infected persons not having made their escape to those cassals.

Was there an order from the commander in chief not to feel the pulses of the plague patients, under a fine of 80 days quarantine?—There was. I find now on referring to my notes, that I have made a mistake; the medical men were interdicted from feeling pulses, only under a penalty of quarantine for a *considerable* number of days; the mulct for feeling pulses (even through a tobacco leaf) being not less than 15 or 20 days.

Did you go among or near many persons afflicted with the plague, or did you keep personally

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personally from them, except among your own soldiers?—I volunteered my services to examine the patients in the lazaretto, some of whom I saw and examined

Do you recollect any who were ill in the lazarettos?—I rather think I was prevented from seeing the living cases of plague within their wards, and that I examined more particularly the dead.

Do you consider dead cases capable of producing plague?—From the general opinion which is abroad on this point, I should conceive they are not so liable, if liable at all.

Has the quarantine in Malta been regularly attended to, prior to the breaking out of the plague?—I have had no opportunities of judging of that; my attention to quarantine laws was not particularly arrested, till I saw danger in our neighbourhood.

Is it not likely to suppose that cases of plague have frequently arrived in Malta, prior to the breaking out of the plague?—I understood that it had repeatedly been known in the lazaretto, but was stopped by prompt precaution. I yesterday produced the title-page of a book, in which there was an engraving of a monument to the memory of a grand master in 1743, who had arrested the plague.

Did you remain at Malta after 1813?—I think I left Malta in April or May 1814.

Was there a plague in May 1814, at Malta?—I never heard it recurred in that year.

What was done with the clothes and bedding of the persons who died of the plague?—I understood, generally destroyed; though in some instances not until long, after their being infected.

Upon the whole, do you consider the plague to be a disease propagated by contagion, like the small-pox and other eruptive diseases?—I do.

Do you believe it may be so propagated, independent of any influence of the atmosphere?—I believe it may.

Do you consider insulation by the means of quarantine, the most effectual method of preserving against the plague?—By far the most effectual.

Do you know of any cause of communication of plague, besides contagion?—None that will explain its production and dissemination, except a contagion *sui generis*.

Explain your meaning of *sui generis*?—I believe it signifies whatever is quite peculiar to the thing spoken of, consequently the contagion of plague is quite peculiar in producing the plague. Take other examples; the contagion of the small-pox is peculiar in producing small-pox only; the contagion of the measles is peculiar in producing measles only; and so in like manner the contagion of the plague is peculiar to itself, or what is termed specific.

By peculiar, do you only mean that the contagion of the plague will produce plague, and the contagion of the small-pox, small-pox?—I mean that only.

Then you do not allude to the mode of producing the effect?—We know nothing of the *modus operandi* of the contagion, it is quite inscrutable.

Do you wish to state something as to the arrangement for the guards?—I should have mentioned in my examination on this head, that some part of the police guards were enrolled in the month of July, by the gentlemen placed at the head of the police.

Have you ever heard of the plague in England?—I have.

Mention the year?—I have read of several having visited England, but my recollection respecting them is not distinct; I recollect most of that plague which occurred in the year 1665.

Do you consider Dr. Sydenham's account of the plague, as the best?—I think Dr. Sydenham's account did not result from any very patient or philosophical investigation of the disease.

Does Dr. Sydenham consider it the real Levant plague?—I think not; but it is so long since I read the work, that I cannot charge my memory with any of his observations.

Do you consider it yourself, as the real plague of the Levant?—I do, decidedly.

Have you ever heard of plague since that period?—I am not prepared to answer that question; whether it has visited England since or not, I should apprehend, could only be answered by those engaged about the health office.

If the expurgators of goods at the quarantine establishment have never received plague from opening the bales from the Levant, even those which come with foul bills of health, should you not from thence conclude, that there was no matter of infection contained in the bales?—No; the caution enjoined in the operation of expurgation, may be sufficiently great to prevent the reception of contagion of plague, even though it existed; the intensity of the contagion may be so blunted by length of time, and by care, as not to be calculated to excite the disease readily.

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Has it not astonished you, that for a period of 154 years, there should have been no occurrence of plague in England?—I cannot say it astonishes me more with respect to England, than other places. I find it has paid visits at the distance of long intervals of time to other countries as well as England; and we do not know enough of what constitutes aptitude in persons to receive the contagion, in order to know under what circumstances the disease must necessarily be produced.

Do you consider the quarantine establishments in England to have been one of the causes of preventing plague from being introduced?—I should think the quarantine establishment taken in all its bearings, abroad and at home, has had a great share in preventing the introduction of the disease.

Do you suppose the corn is capable of producing infection, and therefore ought to be the subject of the quarantine laws?—On that point I am not able to speak; I do not believe it is considered an article of high susceptibility.

To what articles should you attribute the greatest probability of plague infection?—I cannot be certain, but I should rather think woollen clothes and cotton; upon this part of the subject I would rather not answer; I am very doubtful with respect to the degrees of susceptibility of different articles.

Were the arrangements made at Malta, respecting the plague in 1813, very expensive to Government, during the plague?—I should think they must have been a very great expense; but I only speak from surmise, concluding from what I saw.

Dr. William Pym, called in; and Examined.

Dr.
William Pym.

ARE you acquainted with the plague in the Mediterranean?—No, I never saw it.

You was an officer at the quarantine establishment at Malta?—Formerly I was; I am not now.

Do you consider the plague to be propagated by contagion, in the same manner as the small-pox and other eruptive diseases?—Not exactly in the same way; the small-pox may be communicated by being in the same room, or at a considerable distance from a person labouring under the disease, without contact; to be infected by the plague, contact or very near approach to the person under the disease is supposed to be necessary.

Do you believe that it is independent of any disease of the atmosphere?—I do.

Do you consider that insulation by the means of quarantine, the most effectual for preventing it?—I do.

Do you give your opinion on the contagious nature of the plague, from your own knowledge, drawn from your own observations?—No, not from my own observations; I never saw it.

From whence?—From general information; from reading, and from facts communicated to me by individuals who had seen the disease in Egypt, at Malta, and other places. I know one instance of the plague having been communicated at sea; some French gun boats were taken by a man of war, they were ordered alongside, and while lying there, the person ordered on board to issue provisions, &c. received the infection of the plague.

Name the ship?—The Theseus.

What year was it?—In the year 1800.

In what part of the world?—Off the coast of Egypt.

Have you ever heard of the plague in England?—Not since the last plague in London.

Was that the real plague?—From the history of it, I consider it to have been the real plague.

You have said, that the insulation of goods, which it is the object of quarantine regulations to secure, is likely to prevent the dispersion of the contagion of the plague?—I think so, more particularly in places near the focus of contagion.

Suppose, as is the case in England, the quarantine regulations should have been established, and in force for 12 or 14 years, with care, would not the contagion of the plague, if brought by persons or goods on board ships from foreign countries, show itself, if at all, in these quarantine establishments?—I consider the length of the voyage, and the care in opening the bales of goods, particularly their being opened in the open air, as one means of preventing the appearance of plague in this country. The lazarettos are certainly the most likely places for the plague to show itself.

What is the cause that no instance of the infection of the plague being brought to this country, is known to have appeared in the quarantine establishment?—I consider the length of the voyage gives some security; and the goods being opened in the

the open air adds much to that security. The plague now is in Barbary, at Tangiers; I conceive that if goods were packed up there and sent to England, there would be great risk unless they were opened in the open air.

Then according to your opinion, if the same care was observed in the case of landing goods, and purifying them by exposure to the air; if ships were admitted to immediate pratique, as is observed in landing persons and goods, and purifying them at quarantine establishments, ships conveying persons and goods to England might be with safety admitted, with the same bills of health as those with which they are at present admitted at our quarantine establishments?—I should consider that to be actually quarantine.

Then how do you account for this, that those whose duty it is to perform these expurgations of goods imported, should not ever, if the contagious matter of the plague has been about these goods, have caught it in the quarantine establishment?—It is difficult to answer that; but I think the danger might be increased if the goods, cotton for instance, were distributed among weavers in their small and ill-ventilated apartments, without having undergone the purification which they do in the open air in the lazaretto.

Do you know what the course of practice, with a view to the expurgation of goods from infection or plague, is in our quarantine establishments?—Yes, I do.

Then you can inform the Committee, on your own knowledge, what the usual practice of the expurgators is, in the personal performance of their duty, with respect to ships coming with foul bills of health?—The first step is, with respect to bales of cotton, to get a certain number of bales on deck in the importing ship; the bales are opened at one end, and a certain quantity of cotton drawn out, by the person employed pushing his hand and arm in as deep as he can (in this country they do it with their hands; at Venice and Marseilles, when cargoes are infected, they do it with iron hooks.) The bale remains in this state for three days, as well as I can recollect, when the other end is opened and undergoes the same operation for three days longer; the bales are then removed into the lazaretto, where they are again opened at both ends, the cotton pulled out, and exposed to the air as much as possible for forty days.

In performing their duty so, do you not think the expurgators expose themselves to every possible risk of taking the plague, by contact with the cotton, if the plague was attached to it?—They expose themselves certainly, but not so much as if the cotton had been admitted into small apartments, such as weavers occupy, where they are liable to come in contact with it without its having been purified by exposure to a circulation of air.

Is your opinion, such as you have drawn from the knowledge of others, of the contagious nature of the plague, that it is more easily communicated by actual contact than by inspiration or vapour from an infected person?—It is from the experience of others, particularly that of our medical officers of our army in Egypt and at Malta; on this subject Sir James Macgregor has written very fully.

Then, is it more communicable by contact?—In very many instances it has been proved to have been communicated by contact.

Is it not matter of wonder to you, that in an establishment of fourteen years duration and full practice, and with the great care the expurgators take in performing their duty in the manner you have described, the expurgators should never any one of them have taken the plague from goods which came in ships having foul bills of health?—It must appear extraordinary, if the goods really were infected.

Then you must either wonder, that the plague has never been taken by these expurgators, or suppose that the bales of cotton in which they thrust their hands, had not matter of the plague in them?—Malta, before 1813, had been nearly as long free from the plague as England has. The plague, in my opinion, was introduced into Malta by goods infected with the plague, and which had not been expurgated.

You have said, that at Venice and Marseilles the practice is to draw out the cotton with iron hooks; do you know that it is different at Malta?—I have seen them doing it with their hands at Malta; at Venice and Marseilles, I believe it is only infected cargoes that are treated with hooks.

But you do not know, that during the whole of the time that Malta was exempt from the plague as in England, it had been the practice to do it with iron hooks?—I never heard that it was the custom to use iron hooks; previously to my superintending the quarantine department in that island, it was customary completely to unpack every bale of cotton, that it might be the more exposed to the air; this occa-

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sioned great inconvenience and considerable loss to the merchants ; and in consequence of a representation from them, I directed cotton to be purified there the same way as in England.

When you say, that you have seen the expurgation performed at Malta, with the hands and arms as in England, you speak of a time since Malta fell into the occupation of His Majesty?—I do.

You have no knowledge of the manner of expurgating goods before Malta became a British possession?—No knowledge of my own.

Have you heard that it was done differently at Malta, before it fell into the possession of His Majesty, from the manner in which it is done at Venice and Marseilles?—No ; I rather think it was carried on in the same way, for the same persons remained in their official situation.

You was an officer in the quarantine establishment at Malta?—I was formerly ; I am at present confidential adviser to the Privy Council, in matters relating to quarantine.

But you have no official situation?—I have not had any since the year 1813.

What was you in the quarantine establishment at Malta, in the year to which you allude?—I was superintendant of the quarantine department there.

How many persons were employed under you?—I do not know that I can answer that question positively ; I think there were two commissaries, two captains of the port, one captain of the lazaretto, a secretary and vice-secretary, a proto-medico or physician, and a great many persons under the description of guardians and expurgators.

How many expurgators were employed?—That depended entirely on the quantity of goods landed.

Then you used to increase or diminish the expurgators, according to the quantity of goods landed?—Yes.

Were the quarantine laws there rigidly observed?—During my time very rigidly observed ; and before that, since 1800, since the army came from Egypt.

Do you think goods may be infected with the plague, and communicate it to persons?—I do.

You have stated just now, that contact with persons has been proved to have produced the plague?—It has.

Has it not been also proved, that contact with plague patients has not produced the plague?—Many instances, I believe, can be produced ; and the same may be said of small-pox, typhus fever, yellow fever, and other contagious diseases.

Do you think there are more numerous instances to prove that plague is produced by contact, or to prove that contact does not produce the plague?—From our experience in Egypt, it appeared that there were very few in the way of having it, that is, who communicated with the infected, who escaped it, unless they took precautions, such as washing hands.

Was you in the army?—I was not ; I obtained my information from others.

To what do you attribute the expurgators in England not taking the plague for so many years?—There is a probability that the goods which arrived might not have been infected. I consider the length of time they are shut up during the voyage, and the exposure to the open air, during the period of quarantine, as the principal causes of their escape.

Do you suppose that all the goods, or a greater part, landed in England, are exposed to ventilation before they are landed?—They ought to be, according to the instructions given to the people, who are sworn to do their duty.

You have no personal knowledge as to the practice in England?—I rather suspect it had been done very negligently in former times.

Have you any reason for knowing it?—Yes ; I know instances of it.

For many years?—I have not been consulted many years ; I was sent to Standgate Creek in 1813, and then I thought it was done negligently.

Is it now?—I suppose it is better done now ; the officers have had their line of duty pointed out to them, and I believe understand it better than they did formerly.

Do you conclude then, that all the goods brought from the Levant now, where we understand there are foul bills of health, are exposed to ventilation before they are landed?—I should suppose now that all goods, coming with foul bills of health, are exposed to ventilation ; and I consider also, that many of the cargoes have been embarked when no plague prevailed ; but one accident of plague occurring before the sailing of the vessel, makes it necessary to have a foul bill of health. The Lords of His

His Majesty's council have full power to diminish the term of quarantine, and I believe very generally take those circumstances into their consideration.

Do you conceive, that during the issuing foul bills of health, the bales which are imported contain at the time infectious matter of plague?—I should suppose they seldom do; but it is very possible that they might, for persons are liable to have the plague in their constitution, without their being sensible of it, and without complaining; in which case, if they should pack goods, particularly cotton, I should conceive them liable to make those goods what may be termed contagious.

Then you conclude that goods even might have arrived, infected with plague matter, in England, during the last few years?—I cannot say positively; it is very possible.

Which is the most likely, that they have been so infected, or not?—It is more likely that men in health will pack and load a ship, than men with the plague in their constitutions; and, therefore, it is less likely that they are infected.

Do not these goods, on their being packed and shipped, go through a vast variety of hands at Smyrna or Constantinople?—I never was at Smyrna or Constantinople myself, therefore I cannot reply to that question.

Do you consider the fever at Gibraltar to have been the plague?—No; I consider it a much more serious disease than the plague; during the fever of 1804, when the population of Gibraltar was not 20,000, 6,000 persons died.

What is the distinguishing mark between that and the plague?—The plague is distinguishable particularly by buboes and carbuncles; the yellow fever is distinguished more particularly by vomiting of a black matter, resembling coffee-grounds in the last stage of the disease, with suppression or rather non-secretion of urine, and an appearance of the stomach upon dissection resembling mortification. Persons are considered liable to repeated attacks of the plague; but from my own experience I can assert, that persons after one attack of yellow fever are as little liable to a second attack, as they are to a second attack of small-pox or measles. By yellow fever, I mean the disease which is now called *Bulam fever*; and not the bilious remittent or marsh fever, mistaken by many medical men for the genuine yellow fever, which are two distinct diseases, the one contagious and the other not.

Sir James M^cGregor, called in; and Examined.

YOU have been long in the medical profession?—I have been on the medical staff of the army twenty-six years.

Are you acquainted with the plague?—I have seen the plague in Egypt, and am (as director general of the army medical department) in possession of the details of the plague in Malta and the Ionian Isles.

In what year was you in Egypt?—I went there in 1801.

Were there a great many cases of plague that came under your own inspection?—Few under my own inspection. I was at the head of the medical department of the army which came from India to Egypt; it was my duty to apportion the attendance, and frame general arrangements.

Had you many cases of plague that came under your inspection?—Under my own immediate inspection; they were the first cases that appeared in the Indian army; there were 165 in that army.

Did the whole 165 come under your own personal inspection?—They did not.

But several of the cases came under your personal inspection; state to the Committee the circumstances attending them; the first case that came under your observation, was it attended with buboes?—With buboes.

With fever?—Fever and buboes.

You then considered it to be true plague?—Most undoubtedly; the two first cases that appeared were hospital servants.

Did the cases prove fatal?—These two, and four other men that slept in the room, all proved fatal.

How do you suppose the first patient caught it?—It never could be traced; but we discovered that the plague existed then in Rosetta where hospitals were situate.

Do you suppose the others who were afterwards infected, caught it of them?—It was distinctly traced to those men; perhaps I could make this matter clearer by referring to a statement which I published at the time.

Was the plague in the country at the time the two Indian servants caught it?—Yes; the hospital in which the first cases of plague appeared, viz. that of the 88th regiment, was situate in Rosetta, and the plague was there at the time.

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William Pym.
(26 March.)

Sir
James M^cGregor.

Sir
James M^cGregor.
(26 March.)

Give your own account?—These cases and the subsequent ones had fever, followed by buboes; but towards the end of the season, in April, May and June, bubo was seen as the first, and in some cases as the only symptom; the seasons from September till June, the first case appeared on 14th September, and the last in June.

Do you believe the plague to be contagious?—Certainly, by contact; I should have some doubts of a very close atmosphere, but I have no direct evidence of that; I could often trace it to contact.

Can it be taken by any other means or cause?—I should think most cases are by actual contact.

Not infection?—No, contact.

Do you mean actual contact with the body, or clothes infected with miasmata?—Both.

Do you think that the air has no operation in the production of disease?—There is a variety of opinion as to that point; a very general opinion is, that a particular constitution of the air is favourable to its spreading.

Then you consider the air as assisting?—Perhaps it may; but I am in possession of no facts to enable me to give a decided opinion on this part of the subject.

What is your reason for considering it contagious?—From having traced it clearly from one subject to another, on the first appearance of the disease in Egypt in 1801. In an hospital where there were 165 men, the disease appeared first in two native Indian servants; they were separated on the following day; but other four servants who slept in the same room, and who, I believe, slept in the same blankets, caught the disease, and the whole six died.

What reason have you to suppose the two first took it by contagion?—I could not immediately trace its origin, in the two first cases; but subsequently it was traced from the two servants to all who were afterwards attacked.

Might it not have been produced by the original agency of the air?—There was nothing particular in the air of the hospital where the plague appeared, nor any thing that could be discovered, different from all the other hospitals, or from the hospital to which the whole 150 men were removed afterwards; perhaps it might be satisfactory to know, that in the regimental hospital in which it first appeared, it was got rid of by separation.

Separation from what?—After these six men were removed, others with symptoms of fever were immediately separated, and placed in distinct rooms under observation. As I have stated, there were about 165 men in that hospital; immediately after the discovery of the plague, all the cases of it were sent to a pest house; the suspicious cases, those with symptoms of fever, were placed in observation rooms; and then the whole of the remainder of the 165 men were, without loss of time, removed to another hospital prepared for them. Before any man was removed to the new hospital, the strictest precautions were used; his hair being cut off, he was put into a bath, and the whole of his clothing left outside the hospital and destroyed; each man was then provided with new and fresh clothing. The consequence of these precautions having been rigidly enforced was, that after entering the new hospital, no new case of the disease appeared.

Were they infected with the plague before they went into the hospital?—No.

Do you mean, that all those who went into the hospital were persons not infected?—Not infected; care was taken to prevent any person with the slightest appearance of the disease from going there.

Do you think the plague can be produced from goods and things, as well as persons?—I should think from goods; I can speak with certainty of the clothing of men; and I can also speak with certainty, that blankets have conveyed it.

Have you had instances where contact with plague patients has taken place, but no disorder has occurred?—Yes, I have known some such instances; on the first appearance of the disease in the months of September, October, November and December, when the disease was virulent, I knew of very few cases where the disease did not follow contact; but afterwards, when the most rigid precautions were taken, and towards what I have denominated the end of the season, and when the disease was in a mild form, people went sometimes together with impunity, a case of plague has been detected, and people in the same tent have not had it.

Were many taken with the plague together at the same time, simultaneously, as they call it?—I think not; the 160 fatal cases of plague in the Indian army were pretty equally divided among them, the first four or five months after its appearance.

Of those afflicted with the plague, what proportion died?—I am sorry to say, that soon

soon after the first part of the season none recovered; indeed the subjects of the first part of the season were mostly native troops, the Sepoys; and many unfavourable circumstances along with the virulence of the disease attended.

From what number of soldiers were those 165 taken?—The Indian army consisted of 7,886; of those 3,759 were Europeans, and 4,127 natives of India.

How many of the 165 were Europeans, and how many natives?—There died of the plague, of Europeans 38, and of natives of India 127.

When does the plague generally cease?—The inhabitants of Egypt have an idea that it ceases on St. John's day, the summer solstice.

To what do they attribute it?—The general belief is, that the extremes of heat and cold arrest the plague.

Do not the waters of the Nile overflow the Delta, about June almost invariably?—The increase continues to that time, and there is a great deal of slime and mud thrown up on the banks of the river, from the low situation of the country; the Delta is a marshy low country; but the plague always commits as much devastation in Upper Egypt, where there is no marsh.

Does the plague subside suddenly?—No, it subsides gradually; from perhaps February or March till June.

Does the plague occur in Upper Egypt, prior to Lower Egypt?—In descending from Upper Egypt, we understood, in its capital that they had had what they termed *accidents*, before we came down; and that in fact the disease was never out of the country.

What time did you come down?—In June.

Where did you land?—At Kossier in the Arabian Gulph.

Do you recollect the month you landed there?—On the 16th May.

And from June to September was there no plague?—No plague in the British or Indian army; and it was confined there that year mostly to Rosetta.

To what cause do you attribute the suspension of the plague?—The natives of the country have an idea that extreme heat extinguishes the disease. It is a pretty general opinion too, that the disease is never entirely extinct in the country, but that it is called into action by causes which we are perhaps not very well acquainted with.

Do you not consider that the exhalations of the slimy mud of the Delta, may be the chief cause of the plague?—We know a specific disease, caused by these exhalations, but very different from the plague.

Have you ever heard of plague in England?—I have heard of it in the history of the country.

What year?—The last appearance of plague was in 1665.

There has been no appearance of plague since?—I never understood there was.

Do you consider the disorder then to be the real plague of Egypt?—I have not read a description of it lately. I had no doubt, at the time I read of it, that it was the same.

Whose account are you speaking of?—Dr. Mead's.

Do you recollect that Dr. Sydenham was of opinion it was the plague?—I have not read of or attended to the subject of late years.

Have you known of any of the expurgators of goods in this country, afflicted with the plague?—I never heard.

Do you not suppose, that if the plague had been brought in bales of goods to our quarantine establishments, some of the expurgators of goods must have been infected?—They must have run a great risque; the risque would be much diminished from the distance of time the things were packed or opened.

From their not having been infected, would it not be more likely to infer that no infection was brought in the bales?—I think it probably might; but there are many circumstances to be weighed, between the present and the time the plague prevailed in England; improvements in the structures of the houses and towns; cleanliness, ventilation and police regulations, are enforced in a degree unknown in the 17th century. Medical science stands now on different grounds; and we have acquired a knowledge of the disease, its treatment and prevention. In Egypt, as well as in Turkey, many existing circumstances tend to the propagation of contagion, and rendering it more virulent. Were typhus fever to appear in those countries, it is difficult to conceive how it ever could be eradicated.

Do you consider the quarantine establishments of any use in this country, from the circumstance of the plague not having been in the country for so many years?—From the nature of fomites, I should consider the risque would be increased from having no quarantine. The risque in this country would be less, compared with a country

Sir
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country where the intercourse was short and by land, from the country where the plague raged.

From what undoubted truth of the contagion of the plague, that has come under your knowledge, do you found your idea that it is dangerous?—I should refer to my answers to former questions, and I could adduce many other instances that came under my knowledge in Egypt. A man was taken up in Alexandria, and put in the main guard-house; the man the day after showed symptoms of plague, and was sent to the pesthouse, and died of it; several of the guard immediately after this, and prisoners, had the disease. Another instance I should like to mention; a Sepoy had the plague, and was sent to the pesthouse at Aboukir; his wife insisted on accompanying him; the man died in a few days after he went there. The woman, who intreated not to be kept in any part of the pest establishment, was sent to a hut at a distance, and a sentry placed over, and on the 10th day after her removal, she showed symptoms of the plague, and likewise died of it. I could adduce many similar instances.

Martis, 29^o die Aprilis, 1819.

SIR JOHN JACKSON, BARONET,

In the Chair.

Dr. James Curry, Senior Physician to Guy's Hospital, called in;
and Examined.

Dr.
James Curry.
(29 April.)

HAVE you considered the subject of contagious fever and plague?—Generally, but not more particularly as to plague.

Do you consider plague as contagious?—To a certainty; and for this reason, that all persons who are apprised of its contagious nature, may, by keeping apart from those persons who labour under the disease, or are suspected of labouring under the disease, be perfectly free from it, even at a very short distance from them; and probably if they were to keep to the windward of them, they might even almost touch them with impunity.

You speak now to the places where the plague most prevails?—Yes; and that is the general impression made on my mind by all those whose writings I have read upon the subject, as well as by conversation with several who have seen the disease in Egypt, &c.

How do you account for the plague not being in England?—Certain countries are less liable to particular species of diseases than others, without our knowing why; it appears to me, that the plague attends and is usually incidental to a particular state of what is called by Sydenham and others, *constitution of atmosphere*; and the various changes which take place in the air at different times appear to be produced by an interchange of electricity between the earth and atmosphere, which occasions that particular state of the human constitution which renders it liable to some one certain species of disorder, for the time it exerts its influence, and not to others. For instance, the small pox will prevail under one state of atmosphere; the measles under another, and scarlatina under a third; and we scarcely ever find that two of those disorders prevail at the same time: each has a particular or appropriate state of atmosphere which especially favours it.

What do you consider as the cause of plague?—I consider the cause as two-fold; the plague is in itself a highly malignant fever, arising from a peculiar and very virulent morbid poison, generated by the bodies of the sick whilst labouring under the disease, and capable, when applied to the bodies of those who are in health, in sufficient dose or intensity, of exciting the same kind of fever in them; the spread and diffusion of the plague, however, seems to require the co-operation of a *malaria*—*malaria* produced by the state of the soil and the atmosphere operating upon each other; hence, at one time it may be particularly rife and violent, and at another time it may not appear at all.

What do you mean by *malaria*?—It is the Italian word for a morbid vapour arising from the earth, under the influence of the sun's heat, and of the electric interchange already alluded to; it is found every season all along the coasts of the Mediterranean, but in a much greater degree in some places than in others; the essential cause

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cause of the plague is double; first, the specific poison, which is generated or multiplied in the bodies of those who labour under the disease, without which it cannot exist; and secondly, a state or condition of the atmosphere, which gives a strong tendency to support the disease among the people at large; it is virtually occasioned by a state of the atmosphere, and it is communicated by the infection, either in clothes, wearing apparel or bed linen; animal matter, such as feathers, silk or wool, will preserve it much more readily than any thing else.

Do you consider the contagious principle as certain and as settled as that of small-pox?—It cannot be communicated the same way, as far as we know, I mean by inoculation; if the matter be introduced into the system, it does not entirely introduce the plague, but it will introduce a disease which is nearly similar. I have never understood that there is any difference between that form of the plague which affects a person who has touched another afflicted by it, and that which afflicts those who receive it from the odour or vapour arising from a person who is so diseased. The same remark may be made with regard to the small-pox; the contagion of the small-pox is communicated in two ways; one is by the palpable mode of inoculation, or contact; and the other is from the gas or vapour arising from the infected person.

Then you think that actual contact is not absolutely necessary to produce infection?—No, it may arise from vapour, and the contagious matter contained in the atmosphere.

Do you state, that the contagion is not always propagated by contact?—No; and it is so with some diseases, that they cannot be propagated in that way. I do not say it is always so with respect to plague; but, for instance, measles, with all the experiments that have been made on the subject, never have been palpably communicated by inoculation. Each poison may be supposed to have a peculiar mode of existence, and a peculiar mode of propagation. The same case occurs with regard to the whooping-cough. The whooping-cough has never yet been communicated, except by the breath, or by coming near the person infected with it.

Do you consider the fevers which are prevailing in Ireland, and in this country, to be both, or either of them, contagious or infectious?—I doubt whether a person removed from the place where he was taken ill of that fever, and carried even to a short distance, would communicate it to anybody, even under the very worst state that he could have that fever.

Either in England or Ireland?—Yes; and I will give you my reason for thinking so. At one time it was a great question, whether the yellow fever at Philadelphia was of domestic origin, or originated from importation; and after we began to take patients from Philadelphia to a place called Bush Hill, not a single example took place of their communicating the disease to other persons.

Have you ever heard of the plague being in London?—Not since 1665.

Not even in the quarantine establishments?—No.

To what reason do you attribute that circumstance?—I believe the propagation of the disease, or the existence of it, must chiefly arise from a certain state of the atmosphere having a peculiar disposition to receive the disorder.

Do you consider the plague contagious from goods, as well as from persons?—Much less so; because the clothes of a person affected with the plague, become saturated with the poison in the person, and are much more liable to communicate the disorder than goods. Besides, it is scarcely to be supposed, that bales of goods, coming from a country affected with the plague, would have been handled by persons who had the plague, because persons so affected would be incapacitated from labour.

Do you suppose, that goods which have been imported from a country that is infected with the plague, would not communicate that disease?—I believe, that if they communicated it at all, (which I doubt,) it would be from those goods having been extremely confined. It does not meet with a suitable soil or sun here.

Is it your opinion, that if a bale of goods be placed in a room where there is an infected person, they would be likely to imbibe so much of the infecting vapour as to convey the infection to a distance when removed?—It is scarcely possible to answer that question, for this reason; that the size of the room, and the circumstance whether the person is lying on the bale of goods or not, must be taken into consideration; but a mere bale of goods placed in the corner of a room where there is an infected person, and not touched by that person so labouring under the plague, I should think would be very little subject to carry infection.

Then you consider that the effect of the vapour can only be understood to be infectious

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infectious when any body or goods are placed near to an infected person?—Either the body of the patient, or his wearing apparel or bed-clothes, by touching or handling which the infection may be communicated, they having strongly imbibed it.

What do you conceive is the cause of the annual revival of the plague in Egypt and those regions?—The peculiar operation of the sun and the change of the Nile. It is said to cease always on the 24th of June in Egypt; that is the time the sun crosses the equator.

Do you not suppose that the cause of its imagined stopping always on the 24th of June, is not generally to be attributed to the overflowing of the Delta by the Nile; because when the Delta is overflowed the plague instantly subsides, I understand?—It does not appear to me to depend upon that; because the run, or rather the spread of water on dry land, does not produce any sickness. It is the fall of the water, and leaving the mud exposed to the sun and air, together with the state of the atmosphere, that produce it.

Do not you consider that the reason why we have not the plague in this country from goods brought from places infected, is, because there is no infection contained in those goods so imported?—Why I suspect there is very little infection in such goods; but I cannot say any thing about that practically.

Then you think that the state of the atmosphere is one of the first causes?—Yes.

Is it your opinion that in the year 1665, the prevalence of the plague in this country was in consequence of the atmosphere being in such a state as to favour the operation of the contagion?—Why, contagions divide themselves into two great classes. One class consists of those diseases that scarcely ever, if at all, occur more than once during the life of an individual. Such is the small-pox, the measles, the whooping-cough, and scarlatina. There is another class of fever which are also communicated by contagion, and that capable of occurring more than once in the life of an individual, as for example, typhus and the plague. The first class depend upon a contagion which is only multiplied through the bodies of persons labouring under the same disease; like seed sown in the earth, which produce the same plant, and so on *ad infinitum*. The other class is capable of being generated *de novo*, as the contagion of typhus fever, and in plague countries the contagion of plague. In one case the poison is always in existence, either in an active or dormant state; and in the other it may be so, for any thing that we can say to the contrary, but it is much more probable that it is created afresh. The question appears to correspond with that respecting the small-pox being epidemic. The greater probability is, that under certain circumstances of the sun, the climate, and the particular state of individual constitutions concurring together, the plague and typhus fever are capable of being generated *de novo*. I am therefore of opinion that the plague which prevailed in London, in the year 1665, was more probably generated here, than imported.

Do you consider that the circumstance of the plague not having occurred in any of our quarantine establishments for these last 100 years, a good reason for inferring that the disease was generated here in the year 1665, and not imported?—I am rather disposed to believe that every plague, even in the Levant, is oftener generated than propagated by the contagion.

Then you are inclined to believe that the plague in this country, of 1665, originated in England, and was not imported?—Yes, under a state of circumstances which may by possibility occur again, but which as yet, has not occurred a second time.

Do you think it impossible to import plague into England?—I think if it were imported it would affect but few; and the cases would be so insulated, that it would be very soon cut off.

But if there should be again a state of the atmosphere in England, in any degree resembling the state of the atmosphere in 1665, if the plague should happen to be imported at that time, would there not be a strong probability of the infection spreading?—Certainly.

Is it your opinion that such a state of atmosphere may again occur?—Whatever has happened in the world once, may happen again, except perhaps the deluge or such circumstances.

Do you consider the quarantine establishments of service?—From the circumstance of Holland never having been at all affected with the plague, although admitting goods from the Levant without difficulty, I should conclude it would be the same with regard to this country, and with an equal immunity.

Holland admits goods from the Levant, even without quarantine?—Yes.

If persons infected with the plague were to arrive on board our quarantine vessels, would it be best to suffer them to be landed, or to keep them on board?—I should conceive

conceive it would be more safe to keep them on board, and the same degree of ventilation can be supplied with a little pains so as to dissipate the vapour; and there is no poisonous vapour arising from the body of the sick person, which may not be so diluted with atmospheric air as to be rendered uninfectious.

Would not the improvement of health on landing, overcome the contagion?—I do not know of any improvement that would arise from landing, further than walking; and if a person is able to walk, he may as well walk the deck of a quarantine ship.

But is there not some beneficial consequence arising from touching *terra firma*; is there no electrical effect?—Nothing but that which would occur equally on board of ship. The question, taken in its general bearing, would make rather against the supposition inferred by your question. Several years ago, when I was lecturing on the subject of contagion and fever, and the influence of *malaria* arising from the land, the late Captain Pelly happened to be present at the lecture; and I was mentioning the fact, that in the West Indies, *cæteris paribus*, the inhabitants to the windward of the islands have not the fever so much as those persons who reside on the leeward side; because those persons who reside on the leeward side of the islands are necessarily exposed to the fever arising from the land which intervened between the windward side and the leeward side. In corroboration of that, he mentioned a very curious circumstance, which had been repeatedly observed by himself, and by many other officers who were in the Channel fleet, that as soon as they got out of sight of land, and had an entire sea breeze, the men and boys might go to sleep in the tops, and wake after an hour or two without any injury; but as soon as they came up the Channel, so as to receive the influence of a land wind from the English or French coast, they always wake with a cold upon them if they have been so to sleep, or have a cold a short time afterwards; so that it would appear, that all land wind has something contagious attached to it, in a greater or less degree.

Do you think, that the plague of 1665 in this country, was the same as the Levant plague?—We have no accurate description of it by which that can be ascertained; and it appears even with regard to the Levant plague, that there are five or six varieties. They are classed by Dr. Russel, as consisting of five or six sorts, and by other persons as being of seven descriptions.

Is the plague, as we now understand it, of very ancient date?—It was supposed to be introduced at the time of the Crusades, into western Europe.

Do you mean into the Mediterranean?—Yes.

From Jerusalem and Syria?—Yes; the small-pox and measles were also supposed to be introduced at the same time.

You have stated, that the plague was introduced into western Europe by the Crusaders. Then in that case it must have been carried there by *fomites*?—Most likely by *fomites*.

And therefore it was not generated in Europe, as you suppose the plague of 1665 to have been?—It is capable, as I have said, of existing in a dormant state, or of being created *de novo*. But the peculiar cause may attach to the part of the world where it exists, and it is in a great measure confined to those parts; for though there is a constant communication of it, through the medium of the Black Sea, to the Tartars and Persians, it seems very seldom to be communicated to Russia.

How do you account for the plague having been at Moscow in Russia?—It was said to have been introduced by some soldiers, who had been brought from the coast of the Black Sea.

Then you consider, that the combination of the causes of the plague, more specifically exist where the plague prevails?—Certainly.

And therefore not so likely to occur in other places?—I conceive it might be propagated here, or might be generated *de novo*, though not so likely.

Are you of opinion, that epidemic diseases, under any circumstances, may become contagious?—Yes, by a very near approach to the bodies of persons labouring under the disorder. The vapour arising from the bodies of persons infected, would produce the disorder readily and violently; but in all epidemics they arise in such a great many points at once, that it would be almost impossible to say, that they were produced by contact with infected individuals. In a conversation which I had about four years ago, with a very intelligent Spaniard, who was secretary to the embassy going from Spain to Sweden, he told me a very curious fact, with respect to the town of Medina Sidonia, which is about twelve miles from Cadiz. The first time it was affected with the contagion of the epidemic of Cadiz, only a few houses on one

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side of a street were affected; and the next season, when it occurred in Cadiz, it attacked the greater part of the town of Medina Sidonia; but it was insulated in the first instance.

Do you attribute that to a current of air?—There are many circumstances which escape common observation, and which cannot be accounted for by many, that have yet an influence upon human health. It may be illustrated by a fact, which is commonly observable in this country, by the excessively offensive smell arising from our sewers on particular occasions, which has usually been attributed to the wind setting in in a particular quarter, or blowing up a particular grating, and so up into our houses. But it appears to have no connexion with the *direction* of the wind, nor any *sensible* state of the atmosphere; but rather depends on some peculiar change that has taken place, apparently of an electric nature, between the earth and atmosphere.

Have you not remarked, that the bad smell from sewers, &c. generally precedes rain?—Yes, frequently; but then it must be remembered, that a change in the electric state of the atmosphere always precedes rain. The point may be further illustrated by a variety of phænomena, that are constantly occurring before our eyes, but which are little attended to, and still less inquired after, as to their causes. Frequently during the summer in this country, you may observe a puff of warm air come against your face as you are going along, without any circumstance that can explain it, except that owing to some local cause acting upon such portion of the general atmosphere, as to render it sensibly *hotter* than the general mass: it is what is commonly called a *hot gleam*. This appears to be only a lesser degree of the same phænomenon which produces sirocco of Sicily, the hot winds of India, the harmattan of the Coast of Guinea, the samiel winds of the Desert. You will also frequently observe, in a day when the air is perfectly still and calm, that in travelling along the road, or crossing a plain, like that of Salisbury for example, without a tree, a wall, or a hedge being near, which could account for it, a whirl of leaves and dust will rise in the air, and travel from a few yards perhaps to a quarter of a mile, and cease there; and then another perhaps will arise, and go on. These are only so many lesser degrees of what is known in other countries, especially North America, the West Indies, and still more the Eastern Archipelago, by the name of tornadoes and tiffoons; and they can only be explained satisfactorily by supposing, that a change has taken place in the relative electrical state of the earth and atmosphere, and occasions either a sudden and considerable condensation or expansion of the air over the particular spot, in consequence of which the circumambient air rushes in to fill up the void; and these whirls or tornadoes travel in various and even opposite directions at the same time, no doubt according to circumstances, which are dependent entirely upon some electric interchange which determines both the force and the extent of the motion.

You mean the electric principle travels?—Yes; for the air has no loco-motive power of itself. It must be either subjected to compression, or impulse, or the agency of something extrinsic, such as heat, cold, electricity, &c. to give it motion.

I would ask you, whether you ever had an opportunity of seeing the Levant plague yourself?—Never.

A gentleman has stated to this Committee, that it would be next to impossible to import the plague into this country, if even a high premium were offered for the purpose; what is your opinion upon that subject?—I can only say, I should be very sorry to make the trial.

Dr. Robert Tainsh, called in; and Examined.

Dr.
Robert Tainsh.

YOU were surgeon of the Theseus, I believe, in the Mediterranean, at the siege of Acre?—Yes, I was.

In what year was that?—It was in the years 1798 and 1799.

Did you see any cases of plague whilst there?—Yes.

How many cases of plague did you see?—I saw five cases of plague.

Were they on board the Theseus?—Yes.

What countrymen were the persons infected?—There were three Englishmen and two Frenchmen.

Did they belong to your ship?—The three Englishmen had belonged to the Theseus formerly, and they had been taken in one of our gun-boats. They all appeared infected with the disease.

In what state of the disease were they; had they buboes?—Only one of them had it of any great consequence. The other four were petichial slight cases. They were in a state of convalescence, and had rather the remains of the disease, than any

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any thing else. One of the Frenchmen, however, had buboes, and in a state of suppuration.

Did that Frenchman recover?—Yes.

After what lapse of time?—In about three weeks or a month. Both the Frenchmen were sent on shore.

But was there any communication of the plague to any other persons on board the *Theseus*?—No.

Were there any means of separating these plague patients from the rest of the crew?—Certainly; all of them were removed into one birth on the starboard side of the ship, called *The sick bay*. Every part of their clothes that were on them on their coming on board, were immediately taken off and thrown overboard by my orders. Their bodies were shaved, and no hair left on them that could lodge moisture. They were then washed with soap and warm water, and new clothes were given to them: they had new bedding, new shirts, and every thing new within ten minutes after they came on board.

Who washed them?—One man whom I persuaded so to do, by handling the patient myself, and applying the poultices to the buboes.

Had you communication with the ship's crew at the same time?—Yes; I examined them every morning, to see whether they had caught any infection, but none of them had.

Did the man, who attended these patients, mix with the crew?—He communicated generally with the crew of the ship.

What was your object in destroying their clothing in which they came onboard?—It was a mere caution to prevent those clothes from being again used. It was on account of no particular theory, but merely for cleanliness.

It did not arise then from the belief that it was of itself contagious?—No; and my hands being so much engaged with the knife at that time, I had not much opportunity of studying the disorder.

Did you touch the man who was so badly affected?—Yes, I applied his poultices.

Did the same man attend upon him who had shaved him?—No, the barber of the ship shaved him; and the only precaution used was, when the attendants came out of the sick bay, I made them immerge their hands in a bucket of vinegar.

Do you suppose they always did that?—They were ordered to do so, and a sentry was placed there to oblige them so to do.

How near was the sentry to them?—He was on the opposite side of the ship, the sick bay generally taking in half the gally.

Mr. *Edward Hayes*, called in; and Examined.

HAVE you resided long in a plague country?—Yes, I was born at Smyrna, and resided there nearly all my life. I have resided there nearly 44 years, from the time I was born.

During that period have you seen frequent occurrences of the plague?—Very frequent occurrences of it.

Did you avoid it yourself?—We always do.

By what means?—We shut ourselves up from communication with the town, and only communicate through purveyors.

Do those purveyors have communication with persons who are infected?—Yes, but they are generally people who have had the plague themselves.

Had you the plague?—No; it was once in our family, and I thought I had symptoms of it but it was not the plague. It had got into our house, and several individuals died of it, and among others a relation.

Notwithstanding all was shut up in your house?—Yes; that sometimes happens; but we can almost always trace it to some imprudence of our domestics.

Will you explain what imprudence?—The receiving any articles without putting them through a purification of air, water, or a fumigation.

Have you known instances of persons having communication with persons who were afflicted with the plague, without catching the infection themselves;—Very often.

As often as on the contrary?—No, not by any means.

Do you consider the plague to be absolutely contagious?—Certainly; that is to say, the atmosphere must be in a state when it will spread a great deal more than at other times.

Dr.
Robert Tainsh.
(29 April.)

Mr.
Edward Hayes.

Mr.
Edward Hayes.

(29 April.)

What become of the clothes of a person who dies of the plague?—When an European dies of the plague, we generally destroy the clothes; I mean such as we cannot wash. But when the natives die of the plague, the clothes are sold again; that is, *until lately*. They now discover their folly, and begin to take the same precautions that they do with respect to Europeans clothes; at least with regard to the higher order of Turks, but it is by no means a general custom.

Then do the Turks make no hesitation in putting on the garments of a person who has died of the plague?—The greatest part of them do not.

Nor in sleeping in the same places?—No; but that arises, in a great degree, from their being Predestinarians.

When does the plague generally subside in your country?—When the great cold or the great heat destroys it. It is erroneously supposed, that it must cease about the 24th of June, because the 24th of June is St. John's day; but it is quite absurd to suppose that, because I have seen it cease sometimes before; and I have seen it continue sometimes as late as July or August, when the great heats destroy it.

And when do the great heats usually destroy it?—The virulence of the disorder is almost invariably over by August.

When does it begin?—In March or April.

Do you ship goods promiscuously, whether the plague rages or not?—Yes.

To all parts of Europe?—Yes.

Do you imagine that goods shipped during the time the plague is raging, convey the contagion?—Certainly; and that every country that receives those goods, receives in a degree the contagion of the plague.

To what do you suppose it may be attributed, that England has not the plague from that circumstance?—To the climate, to the length of the voyage, and the exposure of the goods to the air.

If your goods are imported into this country, how comes it that the expurgators of those goods do not catch the plague?—From the same circumstances, perhaps, as that I have seen persons not catch the plague, though attending upon plague people. It may arise from the state of the body; there has been plague in the lazarettos in other countries.

Do you consider the lazarettos of any use in this country?—They are very imperfect; and are by no means adequate to keeping the plague out of the country.

Do you think they are of some use?—Certainly they are of some use; the length of time that persons are obliged to stay there, must be of use.

Are there any quarantine establishments in Holland?—Yes; and vessels that have quitted the Levant at the time the plague prevails, will not be permitted to enter their ports.

You have stated, that the purveyors who carry on the communication between the natives and Europeans, during the existence of plague, are generally persons who have had the plague; are individuals who have had the plague once, less likely to have it again?—If they have had the plague in the severe stage once, and during a period of plague afterwards, if they take every precaution, and keep a proper regimen, they are much less liable to have it, though they are by no means certain of being exempted, because I have known people to have it ten times.

You have stated, that the plague frequently makes its way into European families, from the imprudence of domestics; do you speak from your own knowledge of any case in which the plague has been introduced, by the introduction of goods of any description, into an European family?—Certainly; repeatedly.

From your own knowledge?—Yes, dear-bought knowledge; for it was brought into our family in that way.

In what way?—By servants bringing stockings, or any thing of that kind, into the house, without their having undergone a proper purification.

Are you, however, satisfied that it was introduced by those goods alone, or might it not have been by contact with persons affected by plague?—I have known cases where it has been introduced by goods, and also by walking out, and having communication with individuals who had the plague, without our knowing it.

But I wish to put it to you, whether, within your own knowledge, any case has occurred from which you are satisfied in your own mind that it was introduced solely by goods, without contact?—Repeatedly; I have known many obvious cases of that sort.

Is it your opinion that goods that have been touched by infected persons, will retain that infection for any length of time?—If those goods were closely packed up, they would retain it for a long time; but if the air comes to them, it destroys

destroys it. I am, however, persuaded, that plague might be kept in goods or boxes closely shut up, for many years.

What species of goods are you of opinion are most liable to retain and convey the infection?—All wools, and any linen; any cotton goods. Goats wool is particularly adapted to retain the infection, on account of the way in which it is prepared.

Are goats themselves subject to the plague?—No.

Are animal substances more likely to retain and convey the infection, than vegetable substances?—Certainly.

But cotton goods are liable to carry the infection?—Yes.

Are there any substances which are not liable to retain the infection?—Yes, some substances will not retain it; a stone, for instance, does not; but I should be very sorry to put my hand upon a stone immediately after it had been touched by a person afflicted with the plague.

You say that the inhabitants of Smyrna are in the habit of using many precautions against the plague; have you ever heard of inoculation for the plague?—I have known one or two instances; but as the patients are liable to take it again, it is of very little use.

Have you ever known the plague communicated by inoculation?—In one or two instances.

Has that inoculation caused the plague?—Yes.

Is the cow-pock known at Smyrna?—Yes.

Has it ever been tried as a preventive against the plague?—Not that I know of. It is unfortunate that the consequences of the disease are so rapidly destructive that few medical men ever made it a point to study the nature of the disease; there have been several doctors attempted it, but all of them have fallen victims. One doctor, whose name I forget, was sent to Smyrna by Catherine of Russia, and he waited with great patience for a considerable time while no plague was there; he waited until there was a case of plague occurred; he went into the hospital, and he died in three days afterwards. His mode of attempting to cure the plague was by friction of snow; but I have good reason to believe that friction of oil is a very good application.

Have you ever known mercury used?—It has never been used that I know of.

Did you ever know of a person going into a plague hospital and coming out cured?—Yes, a great many.

What sort of hospitals are they?—There are Roman Catholic hospitals, Armenian hospitals, and hospitals for Jews; and what is a most extraordinary fact, that, even filthy as they are, they recover; but I believe that is in a great degree owing to the care that is taken of them: for there is very little care taken in the Greek hospitals.

Sir Robert Wilson, a Member of the House, called in; and Examined.

I BELIEVE you have been in Egypt?—Yes, with the army.

While in Egypt with the army, have you seen any cases of plague there?—Many; and if you will allow me, I will state the result of my observations. The army that invaded Egypt was divided into two corps, One was stationed at Alexandria, and the other moved on against Cairo; a part of the army which remained stationary at Alexandria had a detachment at Aboukir, where the preceding year many thousand Turks had been put to death in consequence of a defeat in an action with the French, (and where several hundred British and French had recently been interred;) every precaution was taken to prevent the introduction of plague into that part of the army which blockaded Alexandria and was stationed at Aboukir, and from particular local circumstances all communication with the country was successfully intercepted, except under authorized regulations; notwithstanding which precautions, plague broke out three distinct times, beginning amongst the troops occupying Aboukir, and extending to those stationed before Alexandria. That part of the army, Turkish and British, which moved against Cairo, passed through the country where numerous villages were infected with the plague; and during the march the soldiers had constant communication with the inhabitants of those infected villages. At Menoof, where the plague had raged with the greatest violence, a bakery was necessarily established for the use of the army; but none of the persons who attended that bakery were infected with the plague. At Rahmanich there was a lazarette or plague hospital; several men were lying infected with the plague, and many were brought out already dead; others were dying in the environs of the town of the same disorder. The Turks

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stript the bodies of all, indiscriminately, of their clothing, and there was no restraint whatsoever in the communication with the inhabitants, who had also free access to the camps, yet no plague was communicated to the troops. The city of Cairo had lost a great many inhabitants the same year, by the plague. When the army arrived at Cairo and united with the Grand Vizier's army, many of the graves in which the inhabitants had been buried who had died of the plague, were opened and the bodies stripped of their clothing, with which the Turks covered themselves, and yet no soldier of either the British or Turkish armies was infected with the plague. The disorder ceased between the 17th and 24th of June, at the precise time when its cessation had been anticipated and assured by the inhabitants, except at Aboukir, where it continued to exist some time longer. It was also affirmed to us by the French officers, that although the plague had raged in Cairo that year with very great violence, and carried off some of the French army, yet notwithstanding a constant communication was held between the garrison stationed in the citadel and the inhabitants of the town, the soldiers in the citadel were not affected, in any one instance, with the disorder. Many thousands of the inhabitants of Lower Egypt had died that year of the plague. The Indian army, passing through Upper Egypt, had traversed a country in which about sixty thousand inhabitants were said to have perished; whole villages having been destroyed; but yet the troops of that army brought no infection with them, nor were any precautions adopted to prevent contagion on their junction with the British European army. To these circumstances I was myself an eye-witness. I would wish also to state, that as we moved through the country, the inhabitants pointed out to us particular villages that were infected with plague, and which plague did not extend out of those particular villages to any of the contiguous villages, although there was no precaution whatever used as to the communication with the inhabitants of the infected villages. Conversing with Dr. Desegnettes, the chief physician of the French army, and M. Assilini, the head surgeon of the French army, they assured me, that whenever a battalion infected with the plague had been marched out of the infected place, that the soldiers recovered and never conveyed the infection to other garrisons; and that troops marching into that infected garrison which had been vacated, did not become themselves infected, unless they remained there longer than eight or ten days. And M. Assilini further assured me, that several French officers and soldiers, who had the plague, having removed themselves, or been removed when sick of the plague, into other places, they had almost always recovered. But he said, his great difficulty was in persuading people to make the exertion of movement; for they were generally so enervated that they preferred to remain where they were and meet their fate.

What is the inference you draw from these facts, generally?—I should be very unwilling to state any positive inference; but in my own opinion I think the plague is a fever originating in a particular state of the atmosphere, produced from local causes and confined to their influence.

Have you any idea of those causes?—I should suppose it must arise from a putrid state of the atmosphere; because those villages which were infected, were stated by the inhabitants to be generally those where the mud had been left longest, and the moisture only, after considerable stagnation, had been absorbed. The Nile annually overflows all the inhabited land with a body of water four or five feet in depth, and charged with a very rich mud, which it deposits. After several months, when the Nile falls, the water, in a comparative pure state, is carried off the land by canals, which at a prescribed season, are opened for that purpose. As the sun gains power, the moisture of the mud which has been left is absorbed, until the mud becomes quite dry and brittle; the absorption is so great that the ground is over all its surface broken by large fissures, sometimes three or four feet in depth, and which render the passage for horses extremely dangerous.

Is it a sandy mud?—No, it is a clayey mud; an extremely rich mud, quite fat and greasy.

Then it appears from your testimony, that where the greatest caution was exerted the plague occurred, and where it was left to its chance it did not occur.—Yes; the troops, however, being in constant movement, except at intervals of three or four days. And I should have no fear whatever of going into any place infected with the plague, provided I was not obliged to stay there altogether during the plague season.

Should you have any objection to touch a person infected with the plague?—No.

Did you ever touch a person infected with the plague?—No, not knowingly; but about five years ago I went to Constantinople, and the plague had broken out there

there at that time. I took no precaution against it, and went through those parts of the town which were affected by it. I never felt any apprehension; and I neither was infected myself, nor did I communicate the disease to other persons.

Did you lose any men by the plague, at Alexandria and Aboukir?—Yes.

Have you any idea of the number that were affected?—I should think, between the 12th April and 26th August 1801, about 400 were affected, out of which 173 died.

Were they natives of India?—No; Europeans.

All of them?—All of them; mercury was found on that occasion to be the best remedy. Oils were tried, but mercury was found to be most efficacious.

Were any of the natives of India afflicted?—I do not know what happened to the Indian army as they passed back through the country to India, but I know that none of them were afflicted in the advance.

You began by stating, that a very great destruction of Turks had taken place the year before; do you consider that the putrefaction of those 12,000 Turks conducted to infect the atmosphere?—It certainly made the state of the atmosphere much worse; but with regard to putrefaction I must inform the Committee, that bodies do not corrupt there as they do in Europe. The ground is so very salt, and the air so extremely rarified, that bodies become rather pulverized. When we came to the place where the remains of those Turks were, we found the scalps of many, with the hair on them, and parts of their clothes; and though we might look on it as a place of infection, I cannot say that there was any putrefaction there, in the general sense of that term, when applied to the decomposition of bodies. I have seen bodies lying on the surface for months, but from the heat of the sun they lie almost in a mummy state.

Moisture is requisite for putrefaction?—Certainly; and there is a very heavy dew at night; but the ground is so strongly impregnated with salt, that I presume the effect of that moisture is counteracted.

Was there no smell in this place?—Yes; the ground had an offensive smell; but the sand in that country, over which the Nile does not flow, had also generally a peculiar sickly smell; however, that place had, in our opinion, a remarkably offensive smell, in addition to the natural disagreeable smell of the sand. No one had any wish to have any communication with the spot; but there being a fort on that point, we were obliged to have communication with it, and all the boats were at first obliged to come there.

How far is Aboukir from Alexandria?—About eight or ten miles. Whether right or wrong, I do not know, but we always ascribed the plague at Aboukir to the state of the atmosphere, occasioned by the previous decomposition of dead bodies, because every possible precaution had been taken to prevent the infection by communication. The camp was in fact in a state of quarantine, in consequence of the precautions taken.

You have stated, that the French officers thought their garrison at Cairo, had never been infected that year in the citadel; are you aware that they took any precaution, to prevent it?—I know there were none taken; the citadel contained a very small portion of the garrison, perhaps only twelve hundred men. There was an army in the city (including followers,) of near thirty thousand; and the communication of the soldiers of the garrison with those in the town, was constant. Some of the French soldiers in the city died; but the French soldiers themselves, felt a perfect confidence, provided they did not remain stationary in any garrison in which the plague raged. What makes the phenomena of this disorder more remarkable, is, that the villages are insulated, and built on parallel lines, not more than 500 yards asunder; and though six or seven of those villages in one district may be affected with the plague; and though the inhabitants of those infected villages constantly pass through villages not infected, on their route to the Nile; yet, though there is such a daily traverse and communication, the infection will remain in the villages where it broke out, and not extend infection through the district.

Is M. Assalini a very clever man?—Yes, a very clever man.

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Martis, 11^o die Maij, 1819.

SIR JOHN JACKSON, BARONET.

In the Chair.

Charles Dalston Nevinon, M. D. called in; and Examined.

C. D. Nevinon,
M. D.

(11 May.)

HAVE you been abroad at all?—Never.

Then you have not of course seen any case of the Plague?—Not any.

Have you formed any opinion respecting its contagious quality, from reading or otherwise?—Yes I have.

Favour the Committee with it?—That it is a contagious disease.

Do you suppose a person arriving with the plague in England, would be likely to communicate it to others?—I do.

Do you suppose also, that goods infected with the plague are equally the cause of communicating the plague to persons?—They are a cause, but not equally.

How do you account for the circumstance, that none of the expurgators of goods at the quarantine establishments have ever been the least infected with plague?—I do not know that to be the fact, but if it were the fact I should suppose it might arise from the goods being opened in the open air, and the fomes of the disease not being sufficiently concentrated to produce the impregnation of others in the open air.

Then you consider that the plague may have arrived in bales, but still not be able to communicate the infection, from the ventilation?—Yes, in the open air; and with the precautions that are probably usually taken at quarantine stations.

Would it happen in a case of small-pox contagion?—I should think not in the same degree, because the plague is asserted by authors to be difficult of communication and almost by contact only; the small-pox we know to be propagated by the contagion being diffused in the atmosphere, in very diluted portions.

You have never heard of a plague case in England, I suppose, since 1665?—I have heard of such cases, but they turned out upon examination to be false; a few years ago there was such a suspicion in Westminster, in four cases.

But you do not consider there is any verified case of plague in England, since 1665?—Not to my knowledge.

Do you consider the plague of 1665 to have been the real Levant plague?—I do; observing always, that what I now state is an opinion only formed from the effect of reading.

Do you consider the plague as an eruptive disease, and coming under the order of Exanthemata?—No; but eruptions are concomitant with it, in the form of carbuncles petechiæ and buboes.

Do you suppose that persons can be re-infected with the plague?—I do.

And cases have often occurred in your reading?—Not many cases; but some certainly; and physicians who are now alive, have suffered the plague twice.

Is the plague supposed to be a species of typhus?—No; it has typhoid symptoms attending it; but it is not that disease which goes by the name of typhus in this country, there are some of the same symptoms, but not all.

Is typhus contagious?—It is.

In a greater or less degree than the plague, do you suppose?—In a less.

Is typhus fever ever attended with buboes, as in a case of the plague?—No.

Does the propagation of the plague depend materially upon the state of the air?—I should conceive it does, because it is known to commence and terminate under certain states of the atmosphere in countries where it is endemic.

You understand that the plague is said to terminate in Egypt, generally on or about the 24th of June, about the time the waters of the Nile overflow the Delta; does not that make it appear that the exhalation from the mud of the Delta is the cause of the plague in Egypt?—It does not to my mind convey any such impression, because the plague prevails in many parts where there is no mud and has been no mud; and because such a rising and falling of the Nile may induce other circumstances sufficient to account for the alteration in the extension of the contagion.

Is it not likely to have been produced by the narrowness of the streets, and the dirty dress of the inhabitants?—Whatever depresses the animal powers, which these circumstances

circumstances have a tendency to do, must render them more liable to contagion, and that contagion more destructive when it is effected.

C. D. Nevinson,
M. D.

(11 May.)

Do you consider the alteration in cleanliness, in London, which has taken place since 1665, to be the reason why no plague has existed here?—A co-operating, but not the principal cause; believing that the plague originated by importation.

It is not your opinion, that the plague is likely to have originated in this country?—It is my opinion that it did not originate in this country, and that no degree of cleanliness would prevent its being extended to the individuals of the country, if they were sufficiently exposed to the contagion.

That is, if they were exposed to persons having the plague?—And came in contact with them a sufficient length of time.

Do you consider the lazarettos as useful, in preventing the introduction of plague?—I should consider all regulations which prevented the communication of persons infected with the plague with others, as useful, of whatever kind, whether performing quarantine on ship board; in floating lazarettos, or in lazarettos on shore. The plague not appearing in the lazarettos is no more a proof that it is not contagious, than that typhus is not contagious because it does not extend in the hospitals in this metropolis, where every precaution is used, by ventilation and cleanliness, to prevent its propagation.

Then typhus does not communicate in the hospitals?—Certainly not; in St. George's hospital, to which I belong, I never knew an instance of its communication for nearly twenty years, during which I have acted as physician to the charity, nor during nearly six years I was in attendance as a pupil there before; I have certainly seen some of the worst states of typhus in that hospital.

Do you suppose that a plague patient, coming into a hospital, would communicate the disorder?—Not if precautions were used to prevent contact, and they were always put to leeward of the attendants.

Similar precautions as are used in the case of typhus?—Similar precautions as are used in the case of typhus, and similar precautions as are used in pest-houses abroad.

Persons brought in with the small-pox, do they communicate the small-pox in the hospitals?—They do; I have known two or three instances of such extension; and the same with scarlet fever, in one or two cases.

Then the contagion of the small-pox is more diffusible in the atmosphere, than the contagion of the plague?—Much more diffusible in the atmosphere.

Richard Powell, M. D. called in; and Examined.

HAVE you ever been abroad?—Not so as to see the Plague.

*Richard Powell,
M. D.*

(11 May.)

Have you formed any opinion respecting the probable contagion of the plague?—Yes.

Will you state it to the Committee?—That it is contagious.

Will you give your reasons for that opinion?—I deduce it from the recorded facts upon the subject, which establish it to my mind as strongly as any fact with which we are acquainted.

Do you allude to a particular fact?—I allude to the general histories given by authors from the earliest periods; and I should lay a great deal of stress upon the more modern publications of Dr. Russell.

Do you conceive it is equally communicable from goods as persons?—I have no doubt it is communicable from goods; but I should suppose not equally so as from persons affected with it.

To what circumstance do you attribute the plague not having occurred at the quarantine establishments?—To the care which has been taken.

To the ventilation?—Chiefly to the ventilation, but not wholly.

You are of opinion, that the infection of the plague must in some instances have arrived at those establishments?—I do not know how that may be, but I believe it has actually occurred in some of the lazarettos on the Continent.

You suppose then, that the ventilation of the quarantine establishments is sufficient to dispel the cause of plague, if it should arise there?—Certainly it goes a great way towards it; and if no case has occurred I should say the means in the aggregate were sufficient.

Taking it for granted the plague has arrived there?—I only assume from what has occurred elsewhere, that it may have arrived; but as to the sort of goods which may communicate it, I should think it was more likely to be contained in woollen goods

used

Richard Powell,
M. D.

(11 May.)

used for clothing, and which have been in contact with the bodies of the sick; and that the kinds of manufactured goods in the mass, which are the common subjects of importation here, are not so likely to be impregnated with contagious matter.

Do you suppose woollen is more likely to communicate and contain the plague than linen?—I do; but we must not be guided by analogies, for we should bear in mind, that every kind of contagion has its own specific laws; that you cannot argue from one as to what takes place in the other; and I have never seen the plague.

Do you consider, that persons may be re-infected with the plague?—I do not know, but I think they may, as far as evidence goes.

Do you consider it a species of typhus fever?—No, it is a specific disease, and has nothing to do with typhus, except that the symptoms of all severe febrile diseases are similar in many of their points.

But the contagion of the plague is not so easily communicated as the contagion of the small-pox?—We have reason to believe, that the plague is a more fixed sort of contagion, that it is not so diffusible, that it does not act at so great a distance as some others.

Would it not be fair to infer from that, that it depends more upon local causes than any thing else?—Upon my word I do not know on what any contagion originally depends; but I think, where contagious disease exists, it is propagated from those who labour under it, or by some modification of matter produced by their bodies.

Do you suppose, that a person infected with the plague in England, could produce it as easily as one infected with the plague in Constantinople?—I cannot tell that, because I believe the temperature has a very considerable effect upon the spreading of the plague.

Do you consider the typhus fever is contagious?—Indeed I do; from my own experience I can have no doubt about it.

Do you consider the quarantine establishments useful?—I hardly know the laws by which those quarantine establishments are regulated; but I think, that every thing that is connected with care and attention to prevent the introduction of such a disease as the plague, is useful.

And you consider ventilation as likely to prevent the introduction of it?—I think ventilation a great point; in truth, I think it is ventilation chiefly that prevents the spreading of typhus in our hospitals.

The effect of ventilation is the diluting of the poison?—I think it is.

Algernon Frampton, M. D. called in; and Examined.

A. Frampton,
M. D.

(11 May.)

HAVE you been abroad?—No.

Have you formed any opinion respecting the contagion of the Plague?—No, I cannot say that I have formed any opinion worth detailing to the Committee.

Have you ever known a case of the plague in England?—No, never.

The plague is supposed not to have been in England since the year 1665?—I have no knowledge of any subsequent disease under that denomination.

Do you consider the plague a species of typhus fever?—I can scarcely conceive I am qualified to decide that point, never having seen the plague; there can be no doubt they very much resemble each other, and are prevalent at the same time.

Is typhus fever supposed to be contagious?—Under certain circumstances of close and confined situations, but not in open air and well ventilated apartments.

You have not given your mind at all to the consideration of the plague?—Not particularly; I certainly have more doubts on the point than my learned brethren who have been examined here; but I do not think I am qualified to give an opinion at all.

Do you consider there is a diversity of opinion among medical men, as to its contagion?—I cannot speak to that point; I really have no knowledge that I can depend upon.

Have you an opinion upon it?—I have doubts upon it certainly.

Doubts upon what?—Whether it be more contagious than typhus; I can scarcely doubt that it is contagious, under certain circumstances.

Do you consider the quarantine establishments are likely to be useful in this country?—I should certainly think some kind of establishment of that kind proper, under more or less degrees of strictness.

Do you know that the Dutch have no quarantine establishments?—I am not acquainted with that fact.

You

You have stated, that the plague and typhus fever resemble each other; are there not very distinguishing symptoms in the plague, that do not occur in the typhus fever?—The eruption of buboes and carbuncles, or perhaps buboes only.

Which do not appear in the typhus fevers?—Which do not appear in typhus fevers of this country.

Do not other symptoms give the plague a very distinct character, from the typhus fever?—It is supposed so, but I am not satisfied that it is a very distinct disease.

Jovis, 13^o die Maij, 1819.

SIR JOHN JACKSON, BARONET,

In the Chair.

Edward Ash, M.D. called in; and Examined.

ARE you acquainted with the Plague?—I have no personal knowledge of the complaint.

Have you been in countries where it exists?—Never.

Have you heard any thing of it in your travels?—I have travelled a good deal, and have endeavoured to collect all the information I could upon the subject, in travelling on the Continent.

Have you formed any opinion upon it?—As far as I have had an opportunity of collecting sufficient facts I have, in regard to the contagious nature of it.

Favour the Committee with your opinion upon that point?—My opinion in regard to the plague, is, that it is decidedly contagious; that it is propagated from body to body; and from infected articles of merchandize, goods or clothes, to human bodies.

State the reasons for that opinion?—My reasons have been collected merely from general information, from reading books upon the subject; and the facts which have occurred to me in conversation with medical men on the Continent, and in this country. I think the general opinion of all nations where the plague prevails, is such as to make its contagious nature a matter of common observation and experience.

Did any thing peculiar occur at Moscow, to give rise to that conclusion?—My opinion that the plague could be propagated only by contagion, was formed upon several facts; but two in particular I will mention to the Committee. One was the immunity from plague which was preserved in the Foundling House at Moscow, which was free from the disease while the population of the town was perishing around, by drawing a cordon of troops around the building, which was completely insulated, and making the most strict quarantine regulations; by means of which none of the inmates of the hospital perished. Another principal fact to determine my opinion was, the effect of shutting up or wholly insulating the Frank quarter, during the prevalence of the plague in Constantinople, Aleppo, Smyrna, and all the other towns which are exposed to ravages of the disease; a measure the success of which in preventing the spread of plague, renders it impossible to suppose that the plague should be communicated by the air only, and renders it highly probable that contact is necessary to spread the disease.

Do you suppose that the disease is revived annually by some new cause, or an old cause of a prior year?—I am not sufficiently master of the facts, to give more than an opinion upon the subject, although I should think the plague never wholly vanishes in those countries, but is called into action by the return of the former causes at the period, when it again rages.

Assuming that no plague has occurred at any of the quarantine establishments ever since their being established, which is about a hundred years, how do you account for none of the persons at the establishments having been affected with the plague?—I should doubt whether the fact was an universal one, as lately the plague has shown itself in the lazaretto at Venice; and is stated to have appeared in that of Malta, in 1813.

The question is intended to be confined to England?—I should consider that as arising from the length of the voyage, which in general is greater than that of the length of quarantine; and the improbability that the disease should be retained during the whole of that time.

*A. Frampton,
M.D.*

(11 May.)

E. Ash, M.D.

(13 May.)

E. Ash, M.D.

(13 May).

You would rather conclude, that the infection does not arrive in the goods, but perishes before they arrive?—I think it most probable it does not, though on so important a question decisive proofs and experiments would be required; but that in a shorter voyage the infection might be communicated in the goods, as in the case of the plague at Malta, and some of the late pestilential diseases which have appeared on the coast of Italy.

Do you think it is confirmed, that the plague at Malta was occasioned by the importation of goods?—I should wish to decline speaking positively on that question; I have not had documents enough before me, either to assert or deny that that was so, but think it highly probable.

Do you consider our quarantine establishments of use?—I conceive them highly useful; but perhaps the period of time is rather longer than is required in some of the regulations.

Do you mean for persons particularly?—I mean for persons particularly.

Is the plague contagion in any degree similar to that of small-pox?—The contagion of small-pox differs from that of plague, as it depends on a specific virus, more active in its propagation than that of any other disease with which we are acquainted, and less liable to be dissipated by any precautionary measures. The contagion of plague is in all probability considerably to be regulated by ventilation, by measures of cleanliness, and by precautions of a similar nature.

Peter Mere Latham, M.D. called in; and Examined.

P. M. Latham,
M.D.

(13 May).

ARE you acquainted with the subject of the Plague?—I know nothing of the plague from my own observation.

Have you formed any opinion from reading, or otherwise?—From what has been written concerning the plague, I should conceive that the fact of its contagious nature is as well established as any fact in medicine.

What mode would you consider it best to pursue, in order to ascertain whether it is or not contagious?—The only mode which is sufficient to establish a fact of that kind, is by purposely subjecting individuals to its influence, a course that it would be unjustifiable to adopt, for the sake of experiment merely.

What would be the best mode of ascertaining, whether it is contagious, from facts which have occurred?—I consider that the facts which have already occurred are so sufficient to prove its contagion, that it is hardly necessary to institute further experiment.

It appears that a Frenchman was taken on board the Theseus man-of-war, in the Mediterranean, having upon him at the time the plague, attended with suppuration and buboes; he was three weeks on board this ship, got well, and not one person on board the Theseus got the plague; would you consider that as tending to a conclusion, that it is not contagious?—If it was ascertained that a considerable number of the crew came absolutely into contact with the person of the infected individual, I certainly should so consider.

It appears that some persons did communicate with the Frenchman who was ill, and went afterwards among the crew; one or two attended him?—I stipulate for the condition of a considerable number having been brought in absolute contact, because we certainly do find very extraordinary instances of insusceptibility to contagion in particular individuals; for instance, we find certain individuals to whom we cannot communicate the contagion of the vaccine pock, and even of the small-pox, where we have the choice of all the most favourable circumstances for communicating them.

Should you consider a person having the small-pox taken on board a King's ship, with a crew of five hundred persons, and not all of them having had the small-pox, they would remain exempt from the small-pox?—I should not consider it likely.

Then the contagion of plague is very different from that of small pox?—In all probability the contagion of different diseases is influenced by particular laws.

It would appear therefore, that the contagion of the plague is not so diffusible as small-pox?—Probably not. I do not wish to be understood as insisting upon an analogy between small-pox and plague. But I only wish to state, that the instances of individual insusceptibility of the vaccine and variolous infection which are known to me, would forbid me to decide that the plague was absolutely not contagious, from one or two, or three instances of failure, to communicate it even under circumstances conceived to be the most favourable for the purpose.

It is understood by a certificate from the Custom House, that the plague has never appeared at any of our quarantine establishments in England, to what do you attribute that?

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that?—If we consider the distance between England, and any part of the Levant from which the plague can be conveyed, it must appear that each individual of the crew will thus be subjected as it were to a double quarantine, the quarantine which takes place during the voyage, and the quarantine of forty days after he comes here.

*P. M. Latham,
M. D.*

(13 May.)

Should you suppose, that during that period the infection must have arrived in some goods from the Mediterranean?—It should appear that medical men are less acquainted with the length of time in which the rudiments of contagion may reside in goods, than they are with the period of their residence in the human body.

Should you conclude it most likely that the disorder has not arrived at the quarantine establishments in those goods?—I should think it most likely.

Do you consider the quarantine establishments as beneficial and necessary to this country?—Certainly.

But upon the assumption of the probability that the infection would not arrive at them, they would become useless?—With respect to individuals of the crew, I should consider some modification might be with safety introduced into the quarantine laws; but with respect to the goods I can really give no opinion.

Is it not more natural to conclude, that if the infection had arrived in the goods at any of our quarantine establishments, some of the expurgators of goods might have been affected with it?—It is most likely.

Do you consider the plague as a similar disorder to the typhus fever?—I have no means of judging.

Do you consider the typhus fever as contagious?—Certainly.

You have stated, that if the plague had been conveyed in goods, there was a probability that the expurgators would have been affected; is it your opinion that the precautions taken on board the quarantine hulks might prevent such an effect, even if the plague had been conveyed in goods?—I do not know to what quantity of ventilation the goods are exposed, or what is the process they go through; it would probably depend upon the quantity of ventilation.

Is your opinion more conclusive, that the infection does not arrive in the goods, or that it does arrive, and that the ventilation dispels it, and renders it innoxious?—Indeed I am unable to have any confidence in my opinion upon that subject.

James Frank, M. D. called in; and Examined.

HAVE you been in countries where the Plague existed?—Yes, I have.

What is your opinion of its contagious effects?—That it is highly contagious.

*James Frank,
M. D.*

(13 May.)

How do you form that opinion?—I was upon the expedition with Sir Ralph Abercrombie in the year 1800, and had the first establishment of the plague hospital at Aboukir. The army landed in the month of March, and was perfectly free from the disease till about the middle of May; when a person from the commissariat dépôt at Aboukir was reported to be ill, and it was said that he had the plague; he was removed from thence to the hospital, which might be the distance of about a mile, and confined in a tent by himself; he had been ill about four-and-twenty hours before at the dépôt, and it was supposed that he was intoxicated, that his disease arose from excess; he died. I think, on the second or third day, two more persons, from the same dépôt, in a day or two afterwards, were reported to be sick in the same manner, and they were sent to the same place. It was doubtful whether it was the disease; and then it became a question how it had got to the dépôt. There were two reports; one, that it was imported by a Greek boat from Cyprus with Cyprus wine; and the other, that it was brought from Rhamaneh by the Arabs, where it was known the plague had been raging. It was afterwards said that a man had died on board this Greek boat. The impression upon my mind is, that it was brought by this Greek boat; the disease had been at Cyprus and upon the coast of Syria; and Brigadier General Koehler, and the detachment of artillery under his command, had fallen victims to the disease, and died at Jaffa three months previous. I have stated, that I had the superintendence of the plague hospital at Aboukir, and consequently the arrangement for the accommodation of the plague patients, though not the immediate charge of the sick; for it had spread from the attendants, who had caught the disease from those persons above-mentioned who had died, to the sick of the hospital. My whole arrangements were made, upon the principle of its being contagious, to prevent its spreading to the army, which was in the lines before Alexandria, at a distance of ten or twelve miles from the dépôt. The hospital at that time consisted of the wounded men after the actions of the 8th, the 13th and the 21st of March. There were very few sick, who were placed in some rude huts, which the French had built;

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for there was no house whatever at Aboukir, the village having been destroyed; and among those sick the plague patients were sent, it having appeared that the disease had been communicated to them by the attendants upon the first plague patients; and as it was impossible to say who had got the plague or who had not, I recommended that the whole should be guarded by sentinels, and that the whole should be thrown into quarantine: this was effected. The disease increased in the huts at Aboukir; and the medical officers, and the servants attending upon those patients, were almost all seized with the disease, and several of them died; three or four hospital mates died. From these facts I should state, that it is my opinion that it is a contagious disease; for had it not been so, there would have been an equal number of patients, or probably more, among the wounded than there were in the huts; the wounded men, who were in tents and in temporary buildings, being separated from the huts at least half a mile, or probably nearer a mile. These precautions having been taken, of throwing the whole of the plague patients, as soon as circumstances would admit, under quarantine, I think, kept the army upon the lines before Alexandria very free from the disease; for I believe there were very few, if any, cases of plague sent from thence to Aboukir.

Had any of the army at Aboukir the plague?—The plague was almost entirely confined to Aboukir; there could have been but very few, if any, of the army before Alexandria who had the plague, during the whole of the time that the plague hospital was at Aboukir.

Have you any idea of the number of military that took the plague?—I have no return, my papers were all lost; but I should think that return might be got from the army medical board; I should think about three or four hundred; they were chiefly from the sick in the huts, chiefly among the patients and servants; I do not recollect any cases that were sent from the lines, they were chiefly confined to the peninsula of Aboukir, and principally among the huts.

How long did the hospital remain at Aboukir?—I think it was broken up in July.

Were there any plague cases in the hospital at that time?—I believe there were two or three; they were very trifling cases; I think they were sent to Rosetta; I was at Rosetta at the time it was broken up.

Were there a great many deaths?—I do not know what was the proportion of deaths; I should think about one in four, but I do not speak from certain knowledge; that is the impression upon my mind.

Did you happen to hear of any cases of plague having occurred in the army that advanced to Cairo?—There were plague hospitals established at Rosetta; and I imagine those cases must have been sent from the army which advanced to Cairo, or from the troops which remained at Rosetta.

Have you any knowledge of the disease originating from any local circumstances in Egypt?—No, I have not.

Is it not considered to be endemic in that country?—It is epidemic and endemic both; that is to say, there are particular places where it rages more especially; from what I understand, it does not break out every year, or every two years, or every three years.

What do you suppose to be the cause of the plague?—I do not know the cause; but the plague itself appears to me to be a specific contagion, that is brought into action by some particular constitution of air.

Do you suppose, that its revival annually is an originating, or that it depends upon former circumstances?—That is very difficult to say; probably it is conjecture that it depends upon a certain constitution of air to bring it into action; but it is very sure that there is a certain range of temperature upon the thermometer, that is necessary for its appearance; the great cold of Constantinople puts an end to it, and the great heat of Cairo puts an end to it.

That goes to the termination of it?—Yes, but the same applies to the beginning of it; for it never begins in great cold nor great heat.

Does it begin as a new revival, a new origin, or is a seed or virus latent brought into action by circumstances of air or other circumstances; do you suppose the seeds of it remain perpetually?—Yes; and that it is brought into action by a particular constitution of air.

How do you account for the expurgators of goods in our quarantine establishments, not having had the plague for so long a period?—It is a certain fact, that the plague is destroyed by ventilation; it is also certain, that it exists only in a particular constitution of air; I can very readily imagine, that the constitution of air required is not present,

present, though the seeds of the disease may be present, and that it is not called into action; whether the constitution of the air renders the body susceptible of taking the disease or not, is a very difficult question, or one impossible perhaps to answer.

Would you consider, that its not having been called into action by any thing whatever, at our quarantine establishments, for upwards of a hundred years, there is ground to conclude, that the quarantine establishments are useless?—No.

Do you consider, that it is equally communicable from goods as from persons?—Equally.

As there have been no persons arriving at the quarantine establishments having the plague, is it not fair from that circumstance to conclude, that the infection has not arrived in goods?—I stated, that I thought a particular constitution of the air was absolutely necessary, what that may be I know not, but I perceive that the disease rages under a certain temperature, or in a particular state of atmosphere. I conceive that that is not present; I suppose, that if the goods were infected when they were put on board at Smyrna, or any other place, they would arrive in the same state here, because I do not see how those goods can be ventilated whilst they are in bales, nor see how they can be exposed to air upon the passage.

If a person infected with the plague, on board any vessel in the Mediterranean, was coming to Great Britain, should you suppose that he would either die or become cured, for want of that proper and appropriate state of the air?—He would die or be cured upon the passage, if the voyage was very long; if he lived, he would probably arrive without the seeds of the disease about him.

From no person having arrived infected with the plague for so many years, do you not consider, that it is almost impossible for a person to reach our quarantine establishments, with the plague present in him at the moment of his arrival?—I think the length of the voyage, as to persons, would sufficiently purify them.

And cure them?—Yes; if the disease manifested itself it would go through its course, and the person would recover or die; but if it did not show itself, I do not believe the disease would remain latent so long.

Perhaps you consider, that it would not be possible to introduce a person from the Mediterranean, infected with the plague, into our quarantine establishments, in consequence of the length of voyage?—After a long voyage, I should certainly say not; I only speak with respect to the persons and to their clothes, which have been exposed to the air during the voyage.

Your opinion of such security is confined entirely to the persons and their clothes exposed to the air, but has no reference to the circumstance of their touching any goods on board that may have the infection?—Certainly.

Is it your opinion, that a cargo of goods might arrive from the Levant in this country, and bulk not being broken, should be again carried back to the Levant, and then on returning to that state of atmosphere which calls into action that disease, might affect the inhabitants of that country, though it would not have infected the inhabitants of this country, if the bales had been opened?—That is a very difficult question to answer; because, though the state of the atmosphere in the Levant might be favourable to bringing into action the contagion, yet it might not be so here; and that that state of the atmosphere is necessary is very obvious, because it is only at certain times that the disease shows itself in those countries, at Smyrna, at Aleppo, at Grand Cairo, and at other places.

Would the conveying infected goods into a climate less favourable to the spreading of the disease, not destroy the infection so as to render them incapable of conveying the infection, even under circumstances the most favourable for the spreading of the disease; for instance, in the Levant?—I think it probable that infected goods will retain the infection, unless exposed to the air; and therefore, whenever they are exposed to the air, the persons handling them are liable to infection if certain circumstances are favourable to bringing out the contagion.

Do you believe, that the plague ever did exist in this climate?—Yes.

The true Levant plague?—The true Levant plague. I believe it did in the year 1665.

Is it your opinion, that there must have existed some peculiarity in the state of the atmosphere at that period, which was favourable to the spreading of the contagion?—I think there must have been some concurring causes which brought it into activity; the atmosphere alone can never produce the plague. The plague, I have stated before, is a specific contagion, producing a specific effect upon the body.

Although no instance has occurred in this country of the plague, since the year 1665, is it safe to conclude that circumstances might not arise which might be

conductive

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(13 May.)

conducive to the spreading of that infection?—I think that circumstances might arise that would be conducive to the spreading of the infection.

Is your opinion, that the quarantine is necessary, founded on the chance of such a recurrence, or on any other cause?—Certainly founded on the chance of such a recurrence.

Do you consider the plague of 1665 to have been imported into England?—The impression on my mind is, that it was imported.

Do you consider the cause of the plague not having appeared in our quarantines, to have probably occurred from the infection not having arrived, or from the attention paid to ventilating ships arriving from the Mediterranean?—Very probably, to the excellent mode of ventilation.

And not so much the annihilation of the infection, from the length of the voyage?—No, certainly not.

Have not you often heard of cases of persons, who have been in close contact with plague patients, never having taken the plague?—Yes, I have; I myself am one; I have frequently touched plague patients, and never had the disease.

Then it is not so active a contagion as small-pox?—The contagion of the small-pox, when it produces the confluent disease, is often as fatal as that of the plague; it exists in a state of activity in tropical climates, which I believe the plague never does. The plague varies at different times in Egypt; I speak of the plague which I saw in the country in which I was. When it first breaks out, which is about the month of January or February, the cases are few; but they are more violent in their symptoms; as the season goes on the disease becomes milder, but more frequent, in consequence of a greater number of persons being exposed to the infection; it then declines, and ceases altogether at the summer solstice.

Does it cease about the 24th of June invariably?—At Cairo; but it is sporadic upon the coast in July, after the summer solstice.

Do you consider it more contagious, when it is the most violent?—Yes, I do; certainly.

Have you known any instances of medical men inoculating themselves for the plague?—Yes, I have; Doctor White.

Did he die of the complaint?—I believe he died of the complaint, but that is uncertain; he never would suffer himself to be examined whilst he had the disease. It was known he had inoculated himself with matter taken from a pestilential buboe; that he had a shivering fit, and was frightened; that he got up at night and washed his wrist with some volatile alkali, with the hopes of preventing absorption: but he died in the course of three or four days afterwards.

Whether of the plague or not, you are not certain?—I do not know whether he had buboes or not; I should say, but it is merely from hearsay, that he did die of the plague; he never would suffer himself to be examined by the medical men, while he had the disease.

Was his body examined after his death?—I believe not.

Were you acquainted with Doctor White?—Yes.

Have you heard him give his opinion respecting the plague?—Yes, I have.

What was that opinion?—That it was not contagious.

Richard Harrison, M. D. called in; and Examined

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(13 May.)

HAVE you had any opportunity of seeing the Plague?—I was at Naples in 1816 and 1817, during part of that time the plague raged severely at Noja, a town situated about 150 miles from that place; and I have had frequent conversations on the subject with the medical men who had the direction of the sick during that time. I saw, also, at Naples, in the spring and summer of 1817, several persons labouring under a contagious disease, which corresponded with the descriptions generally given of the plague; but will not assert it to have been that disorder. The mortality from it was so great, that our consul was in doubt whether it would not be right to give public notice of the circumstance.

Describe the appearances of what you consider to be plague?—I consider the plague as a typhus fever, with the ordinary symptoms more severe; and in addition, broad purple spots, carbuncles, buboes of the parotids, but more generally in the arm-pits or groin.

Do you consider the plague as contagious?—Assuredly.

And the typhus fever also?—Yes; assuredly.

You consider the plague as a high degree of typhus, and coming under the same classification?—The two diseases may probably arise from different causes, but they

they frequently so nearly resemble each other, differing only apparently in degree, that I think it possible they may be produced from the same cause. I would not be understood to say positively, that I consider them as the same disease.

You are not sure that you have seen the true plague?—No; I saw some cases at Naples labouring under the symptoms I have before mentioned.

If a case of that kind had occurred at Constantinople, would it not have been considered as decisive of the plague?—I should conceive it would.

What do you suppose to be the cause of the plague?—Contagion I should think.

From the revival of former virus, or the occurrence of another originating cause?—I conceive it may be propagated in both ways. The causes which first produced it might produce it again, although it had entirely disappeared; or the disease constantly existing may be of so mild a character as to escape attention, awaiting favourable circumstances to render it active.

You consider that local causes alone might revive it annually?—I should think very probably, under favourable circumstances, in the Levant; but in Europe the disease is only spread by contagion, for the separation of the healthy invariably preserves them.

Do you consider it very similar to small-pox contagion?—I cannot draw a comparison; I consider the two diseases as so different.

Is the contagious quality of it so likely to communicate the disease as small-pox?—I can conceive the plague existing, and yet not very contagious; and I can conceive it existing and extremely contagious; and precisely the same with the small-pox.

Do not you consider the small-pox contagion as more diffusible than the plague?—I should think it difficult to institute the comparison.

To what do you attribute our not having had any plague case in Great Britain for so long a period?—Having had notice only last night, I have scarcely had time to give it a thought. I conceive when a cargo is shipped in any part of the Levant, the sailors of the ship are necessarily employed in taking in the cargo. Under these circumstances, if the plague existed, I do not suppose the ship would arrive in England before the disease had made its appearance; and I suppose when the plague breaks out on the voyage, the vessels put into the nearest port where quarantine can be performed, and are there subjected to the usual precautions. This may be only one reason among others.

Do you consider goods equally communicable of the disease, as persons?—From all I have heard, inquiring of those who have seen the plague very repeatedly, and what I have read, I conceive equally.

How do you account for the expurgators of goods in Great Britain at the quarantine establishments never having taken the plague?—I should suppose the plague makes its appearance before the ships arrive in England, and I conceive the goods liable to give the plague, have undergone purification in foreign lazarettos before their importation into England; and we frequently find a typhus fever, probably from this cause, in a lazaretto; of this I had examples during my attendance on the sick in the quarantine establishment at Naples.

Do you know that the goods are promiscuously shipped at Smyrna, whether or not the plague rages there?—With that I am not acquainted.

Assuming that to be the fact, how do you account for those goods upon their arrival in Great Britain, not communicating the disease at the quarantine establishments?—I should suppose the plague makes its appearance before the ship arrives, and consequently the necessary precautions have been employed.

The fact being that goods are shipped at Smyrna, even in times when the plague rages furiously, and those goods arriving at the quarantine establishment in Great Britain, how do you in those cases account for the expurgators of goods not having the infection?—Although we have authentic accounts of the plague existing at nearly every temperature, still we find it is less virulent at one temperature than at another; perhaps other causes may conspire with temperature to increase its destructive effects. The degree of temperature, and other favourable circumstances for the propagation of plague, not existing at the time the affected goods arrived in England, may have prevented the dissemination of the disorder. But should such circumstances exist, we may again be visited by the plague, and even a typhus fever may have been produced in this country by such goods; for we know that a mild case of plague resembles much typhus fever.

It appears from the Custom-house return, that nothing of that kind has appeared at the quarantine establishments ever since their origin; from that circumstance would

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you not conclude the infection did not arrive?—To give a satisfactory answer to that question, would require more reflection than I have been able to give to this subject.

Do you consider the plague of 1665 to have been imported into Great Britain?—I feel unequal to answer that question.

Do you consider the quarantine establishments as useful?—As very useful; but I should conceive, from what I have seen in the quarantine establishments here, at Venice, Naples, Malta, and other ports of the Mediterranean, that considerable modifications might take place; amongst many other examples, I might instance a circumstance which occurred to myself. I arrived at Dover from Naples in seventeen days, but neither myself, luggage, or carriage, underwent any where quarantine; whereas my other luggage, which I left at the same time, came by sea, and arrived in England a considerable time after me, underwent the usual quarantine. Couriers, who travel with the greatest expedition, do not perform quarantine; although ships, which have taken a long time to perform the voyage from the same place, are frequently obliged to undergo it.

You consider that the regulations might be modified, both with respect to persons and goods?—With respect to goods, I am unable to give an opinion; but I should assuredly think so with respect to persons.

Mr. John Jenkins called in; and Examined.

Mr.
John Jenkins.

(13 May.)

HAVE you been lately in quarantine?—Yes.

Where at?—Standgate Creek.

How long?—I was eighteen days there in quarantine; I was discharged this day week.

Were there many persons in quarantine with you?—Several; there were five pilots on board the Lizard discharged all on one day; there were persons lying in quarantine, who were taken out of other vessels, on account of foul bills; the vessels came from Alexandria; we were detained there longer than our regular time of quarantine, in consequence of a pilot having been put on board, three days after we were put on board; we should have been cleared in fifteen days but for that.

Do you find your own mess on board?—We are allowed so much from the ship, for provisions, while we are on board.

In case of being ill, can you get medical attendance there?—There is a doctor attends every day.

Was any body ill?—Nobody ill, we were all perfectly well; I never knew a pilot to be ill in the quarantine, since I have been a pilot, which was the year 1808.

Did you ever know of any person being affected with the plague, on board the quarantine vessels?—I never heard of any.

What is the longest time that you ever heard of persons remaining in quarantine?—I have heard of a vessel lying sixty days, she came from a place where the plague raged very much; she was taken away from the creek and scuttled; this was before I was a pilot.

Have you ever seen, while they were taking goods on board the lazarettos, that other goods were delivering from the lazarettos?—Yes, on the other side of the vessel.

Do you know how they examine the goods?—They rip open the bales and air them.

Do they open them entirely, to the very heart?—I cannot say exactly to the very heart, but they open them so as to give them air, and when the time of airing is out they pack them afresh, and sew them up.

How many men are there on the Lazaretto establishment?—I cannot say; I believe there are on board the lazarettos that take the goods in, twelve, fourteen, or sixteen hands, master and mate, and guardians.

Are the pilots detained there after the goods are cleared?—Our regular time is fifteen days, after we are put on board the convalescent ship; but when another pilot comes on board, after we have been there four or five days, it is very hard for us to be kept on account of that pilot three or four days longer, the vessels that we have been up with there having been loaded at Alexandria; those vessels lie thirty days.

Martis, 18^o die Maii, 1819.

SIR JOHN JACKSON, BARONET,

In the Chair.

John Mitchell, M. D. called in; and Examined,

HAVE you given your attention, in any particular manner, to the subject of contagion in the Plague?—So far back as 1802, on graduating at the university of Edinburgh, I published a dissertation on continued fevers, wherein the subject of contagion in fevers, as well as the plague, engaged a large share of attention. I have ever since that early period of my professional life, felt a particular interest in the question respecting contagion in these diseases.

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Have you ever seen the plague?—No; I have had no actual experience in the plague, never having been abroad in the countries where it has prevailed; and I have never seen it here, for a very good reason, that there is no record of a single instance of it, since the last great plague in London in 1665.

To what cause or causes would you attribute the freedom of this place from the plague?—It is difficult to give a direct answer to the question; but I beg leave to state, that the diseases of a place are in their nature, even although they go under the same name, as subject to variations, as are the manners, customs and circumstances of its inhabitants. At one time in this country we had well-marked agueish and asthenic or inflammatory complaints; now we have few instances, at least in London, of pure agues, and our inflammatory complaints degenerate into asthenic congestions or defluations. We have had a change from nervous to bilious ailments, and this not founded on the caprice of medical systems, but in the nature of the complaints themselves. In Sydenham's time, whose works are full of the descriptions of the epidemic fevers of London, dependent on particular constitutions of the atmosphere in various years, it was computed that 66,000 out of the 100,000 died in London of fevers. This large proportion of fevers is now supplanted by other diseases; and even our fevers are not of the same complexion they were in those days, for we are strangers to the symptoms in them denoting their former pestilential or malignant quality. But certainly, if any causes could have contributed to the immunity we enjoy from the plague and bad fevers, they are to be found in the greater cleanliness and less crowded state of the inhabitants, with the widening of the streets, and the better and more general construction of common sewers and drains; to which may be added the profusion of water now distributed through the Metropolis. There is a passage in Assalini, an eminent surgeon, who accompanied the French in their expedition to Egypt, and who has published the result of his investigations on the Plague, so very much in point, that I would beg leave to quote it. After stating that the present visitations of the plague in Egypt were unknown in the days of its ancient grandeur; and that the ruins of entire cities destroyed and overwhelmed, with the majestic remains of monuments, in part submerged and surrounded by water, afforded sufficient evidence of the revolutions and changes which the whole surface of Lower Egypt had undergone. He proceeds thus: "At this day, the lakes, the marshes, and the filthiness which one finds in the cities of Lower Egypt, are the principal causes of the frequent diseases to which they are subject, and which can never be eradicated until we have found means to purify the atmosphere of their environs. This important advantage may be obtained, by draining off the waters of the lakes and filling them up; by keeping the cities clean, paving them; and giving a free exit to the rain water, which stagnating in different parts of these cities, becomes corrupted, and conjoined with filth, infects the atmosphere. By similar operations, several cities and provinces in Europe, America, and the Indies, have been rendered healthy. I have no doubt that the salubrity which we enjoy at this day in France and Italy, is the result of the amelioration of agriculture and the perfection of the arts."—As Dr. Mead (who has written on the plague, although he never saw it, has mainly contributed, by his authority, to establish the quarantine regulations of this country,) speaks in a particular manner of Grand Cairo, stating it to be quite a seminary for the plague, I would beg leave to solicit attention to the state of that city, as illustrative of the causes of plague. The streets are narrow and winding, amid a multitude of houses which crowd

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crowd one another; and it is so exceedingly populous, (several families residing in one house, and a number of people in each room,) that Savary informs us, two hundred persons live within a compass that would accommodate thirty in Paris. A great canal, besides, passes through it, into which all manner of filth and carrion is thrown; causing an intolerable stench. Notwithstanding all this, however, it is remarkable that the plague, as well in this city as in others of the same part of the globe, has its chief seasons; for it breaks out or becomes epidemic only when the hot sultry winds from the south, blowing across the sandy plains and deserts of Arabia and Africa, begin to set in. The blasts of these winds are most pernicious to animal life; according as they are described by travellers, under the names of the Simoon, the Samiel, the Kampsin, and the Scirocco. It would seem that they contained a large portion of hydrogen or inflammable gas, and that in their full force, (for the greater levity of this gas, it is probable, causes them to rush in currents,) they extinguish every principle of irritability in the living fibre: persons killed by them, speedily become black and spotted, from extravasated blood. But to return, it is a fact, that so soon as these winds cease to prevail, (and I may here mention that the same winds have been with justice considered, by the most early writers, the chief causes of epidemic diseases, particularly by Hippocrates and Pliny; who say, that the pestilence travels with them from the southern to the western parts of the world,) the disease abates. When, again, the winds from the north-eastern quarters, called by Hippocrates the Etesian, or annual gales, set in, the season of health returns. Conformable to these facts, I may add what Assalini states, "I constantly observed, (he says,) that whenever the winds from the south and south-west prevailed, the number of sick and of deaths was always increased. The contrary happened in fine weather, and when the wind came from the north." As the rising of the Nile happens about the same time these healthy winds begin to blow, covering the muddy and slimy surface of its banks, and washing away all the filth which had been accumulated in the stagnant waters and canals, with which it communicates, the cessation of the plague in many places of Egypt, is calculated almost to a day. Now, if to the filthy and dirty state of the cities in Egypt and the Levant, the pestilential effects of the regular returns of these enervating winds may be attributed, it is very easy to comprehend how London, as Sydenham gives us to understand, in a like crowded and narrow, and dirty state of the streets without drains, such as it was previous to the great fire, should now and then have been subject, in particular constitutions of the atmosphere, to visitations of the plague. But Sydenham's computation of a visit from it every thirty or forty years, founded on speculations about the cycle of particular constitutions of the year, was certainly inaccurate. That particular states or constitutions of the atmosphere, occasionally visit us, affecting the health, as well of the animal as of the vegetable creation, is known to all; for every person must have, more or less, experienced their effects. There was something of the kind lately, during the prevalence of warm southerly winds; when I may state, that people in general felt enervated and languid, easily going into clammy perspirations; and so many were affected by hoarseness, and defluxions and coughs, that it was like an epidemic influenza. It is very pertinent to this subject, I mention, that an author who has written on the climate of Great Britain, expressly takes notice of the influence that these African winds have even on our atmosphere, something like the Scirocco in Italy, only in an exhausted or spent degree. Such winds, or states of the atmosphere, must have double, or what I would term active power, when they act in concert with spots or places where mephitic air, or exhalations abound, from crowded neighbourhoods, stagnant waters, and the imperfection or want of common sewers, &c. It is a wise provision of nature, that such miasmata should not be so ready to mix or continue in union with the healthy proportion of the elements composing the mass of the atmosphere. The effects of them, however, must be more severely felt in some places nearer their source, than we are; and accordingly, some parts of Italy and the south of France, suffer much from them. From such considerations, I am induced not to entertain a doubt that they may, with much justice, be reckoned amongst the causes of the several fevers which of late years have infected the islands of the Mediterranean, and places on the coast of that sea.

You think the plague is of an analogous nature to fever, and dependent on the same general causes?—I am inclined to think so, only that the causes are influenced by the climate and atmosphere of the place, and by the manners and circumstances of its inhabitants. Some, however, following Dr. Cullen and Dr. Mead, neither of whom ever saw the plague, will have it to be an eruptive disease, such as the measles or the small-

small-pox, and dependent like them on a contagion, *sui generis*, either immediately applied from a person sick under it, or mediately, by substances imbued with it. In the first case, it is now insisted, that actual contact with the diseased is necessary for its production; in the latter, it is said, that those substances, technically termed *fomites*, will, without proper ventilation and exposure, retain the *seminium* of the disease for any length of time, so that it may be carried to the most distant parts of the world. I may remark, however, that it is not every substance which is generally accounted fit for retaining, and afterwards diffusing the contagion. Porous substances, such as wool and cotton, are said to be the most dangerous *fomites*. But there really seems a good deal of systematic caprice on this subject. For it follows from the principles of the quarantine laws, that one may take a pinch of snuff from a plague patient, if the box be made of wood or shell; but a gold or silver box must not be touched, since it is charged with the poison. Again, you may break bread with a plague patient, provided it be cold; but if it has been touched by him while hot, you run great risk of being infected.

Do you conceive it of any moment, whether the plague be considered a species of idiopathic fever, or an eruptive disease?—I certainly do; since if the plague observed the same general laws of eruptive diseases, running, like small-pox, a stated course, and affecting a person only once during life, I should be disposed to consider it, like small-pox, dependent upon a specific contagion. Those favouring the doctrine of contagion, aware of the support this gives to their opinion of the contagious nature of the plague, maintain that the buboes and carbuncles occurring in it, as much make it an eruptive disease, as the pustules in the small-pox do that malady; and they assert, that those in whom such buboes have gone through the process of supuration, are equally exempt from it for life, as those are from small-pox, having undergone them. I may observe, that a Dr. Pym, lately engaged the attention of Government, in a publication on the yellow-fever of Gibraltar, which, he says, was contagious, by a speculation about a like exemption from it in those who had once suffered this fever. As to the correctness, however, of this gentleman's opinions about the fever of Gibraltar, the Committee perhaps have already had evidence.

Have you any facts to state, to impugn these opinions held about plague?—Yes; in the first place, admitting it to be true that a person receives the infection of plague from another labouring under it; unlike small-pox, the plague breaks out at no stated period after exposure. In the second place, admitting that the buboes and carbuncles (which I by-the-by may here mention, happen in some bad fevers, admitted *not* to be the plague) are in fact true specific eruptions, there are innumerable instances of admitted plague; nay, I may say, it is very common,—where there are neither buboes nor carbuncles in the whole course of the disease, which oftentimes comes to a favourable crisis by sweats. And in the third place, where there are buboes and carbuncles, unlike the small-pox, they happen at an uncertain period of the disease; and so irregular is their course, that we cannot, as in the pustules of the small-pox, mark the *dies morbi*. Again; as to a person who has once passed through the plague, being secure against it for life, in consequence of the buboes suppurating regularly, the authors who bear witness to the contrary, are numerous on this point. I would, in particular, mention Dr. Russell, both because he is a strenuous supporter of its contagious nature, and because his account of the phenomena of the disease, from actual experience, is the most full and accurate we have. He met with no less than twenty-eight cases of re-infection, not relapse, in the course of only three years practice; he gives a written detail of ten of them, in four of which the buboes in their first attack had dispersed, in other six there had been the proper discharge from the eruptions; of the remaining eighteen, which are not detailed, the buboes, he says, in a majority of them had suppurated; and of the whole twenty-eight not more than six or eight terminated fatally. In concluding on this point, he expresses himself very strongly to the effect, that patients whose buboes had dispersed were not more liable to be attacked again, than were those where there had been a copious discharge from the eruptions. After such stubborn facts, it might be unnecessary to oppose to the opinions of Doctors Mead and Cullen (which last, although he places it among the eruptive diseases, yet calls it a typhus highly contagious) those of other able men who have actually seen the disease. I may mention, however, Assalini, who calls it an epidemic fever, as well as Sydenham; who, after saying that malignant fevers are of the same species as the plague, only not so violent, treats, for such reason, of the cause and cure of both in the same chapter.

You conclude then that the plague is not a peculiar eruptive disease, but a fever; perhaps you mean a species of *typhus*?—The word typhus is very much abused,

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being applied in almost every case of fever, and we therefore hear so much about it, and the "contagious fever of the metropolis," that people are under the constant apprehension of a widely-spreading and dangerous disease. I have seen the fears and credulity of many so wrought on, that the house where a fever patient lay sick, was deserted and shunned by the very relatives. Inasmuch, however, as *typhus* implies a fever of a continued nature, I do not think plague a species of it, since its phenomena, not to mention the causes I have stated, as originating it, more properly rank it under the class of intermittents or remittents. In fact it bears every character, only in a more malignant degree, of the asthenic remittents of warm or unhealthy situations. In the same plague, there are all the symptoms of these fevers, many of which may be called putrid, without buboes or carbuncles, which are considered pathognomic of the plague. Sydenham tells us, the plague usually begins with chilliness and shivering, like the paroxysm of an intermittent. In the more mild and favourable cases, particularly at the beginning, it observes an evident remitting type or form; and even in bad cases, remissions and exacerbations are marked by the expression of the countenance; for in the latter, the muddiness of the eyes which remains in the former, is strangely blended with a redness or lustre, giving a wildness to the look and an indescribable appearance of confusion to the countenance. Dr. Russell's most numerous class of cases, all of them had remissions with exacerbations throughout; and favourable crises happened on the odd days, the third, the fifth, or the seventh, by sweating, like the fevers of warm climates, where a tertian type, simple or variously compounded, most universally prevails. Assalini informs us, that the deaths in his patients happened on the third or fifth day. Now it is a fact, receiving universal assent, that no species of intermittent fever or remittents are contagious. It is likewise a fact, which will not admit of contradiction, that many of the fevers, particularly of warm or unhealthy places, are as dangerous and fatal, carrying fully more devastation with them than the plague. Such epidemics, however, which in former days, from the horror and dismay they created, were attributed to contagion, as other phenomena, in the days of superstition and ignorance, were to supernatural causes, now fall under the cognizance of more philosophical views. It is the conclusion of a very sensible writer on the plague, who appears to have well studied his subject, that the miasmata, which in Germany and England produced tertians, in Hungary pestilential fevers, in Italy remittents, in Syria and Egypt seem to occasion the plague. It is the prejudice of system and the dogmata of the schools, like Monkish superstition, which have upheld this phantom of contagion; and it is only since our army and navy afforded a wide field to practitioners for actual observation on these diseases, that the trammels of system and the dogmata of the schools have been shaken off. But a short while ago, the minute accounts we had of the importations of fevers into the places where they broke out, were received as gospel; as much so as are yet, by many, similar accounts respecting the plague. The yellow fever, for instance, according to a Dr. Warren, who wrote on the fever of Barbadoes, emanated from the plague of Marseilles in 1720. A fever was again imported into the West India islands, according to some from the coast of Bulam in Africa, according to others from Siam in the East Indies. It was this same fever, whose importation into Philadelphia caused such ravages; and at last it became a great traveller, inasmuch as it frequently visited Gibraltar, Cadiz, and other parts of the Mediterranean. I myself recollect the time when it was an unpardonable heresy to attack in a single point this doctrine of febrile contagion, so riveted were physicians to it. I have lived, however, to see many of the opinions and arguments I dared at that time to advance against the common belief in it, and which called forth the anathemas of the profession against me, verified in the field of observation and experience. I trust the time is not far distant, when a similar revolution of sentiment shall be the fate of the plague; the absurdities and notions respecting which, it is painful to contemplate, have caused such a waste of human life. Here, instead of permitting the wretched inhabitants of a place to flee the scourge that visited them, they were condemned to breathe a pestilential atmosphere, becoming daily more infected, from the number of sick with whom they were shut up; every hope of retreat was cut off from them; for even their own abodes, where death and horror raged, they were prohibited to quit, under the pain of death more certain. How revolting to humanity these shuttings up were, need not be stated; and how futile they proved, with other schemes of expurgation, to extinguish the distemper, experience has only to be appealed to. The plague has its seasons, and like other epidemics, is not to be controlled in its ravages by means so ill-directed as these, founded on such erroneous notions; and to be convinced of this, it is only necessary to refer to Russell, most
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of whose facts, whenever they are concerned with the notions to which he is wedded about contagion, are at a like variance with his conclusions. His words are precisely these: "From what has been said of London, Aleppo and Marseilles, it would seem as if there was little observable difference in the mode of its (the plague's) termination in cities where purification was practised, and where it was not."

You do not then believe that the plague is a contagious disease?—No, I do not think it is, nor fevers in general; but as much misunderstanding arises from the promiscuous use of the term "contagion," as well as "infection," I would beg leave to give some precision to their import. They are in many cases synonymous, but "contagion" should be more properly confined to a *somewhat*, capable of separate or self-existence, and of propagating its species *ad infinitum*, through its operation on the human body; while "infection" should rather denote a quality or affection of a substance or body. Hence, in common language we more correctly say, *the air is infectious* than that *it is contagious*; and it is more proper to speak of the infection of the atmosphere, or the contagion in the atmosphere, than *vice versa*. Nor does contagion in common language imply actual contact; for there is no necessity for this contact in small-pox, nor, as it is understood by all those of whom contagion is the creed, in fevers. It is very much owing to the indefinite use and acceptation of these terms, that authors, from Thucydides down to Sir Gilbert Blane, have contributed to swell the catalogue of contagious diseases. The former, in his description of the plague at Athens, from stating that those who approached the sick became affected by it, is cited as authority for the contagious nature of the plague. The latter, from similar circumstances of contiguity, asserts the scurvy to be contagious. Let us take the scurvy as an example, which Sir Gilbert Blane has obliged us with, of what has been called a contagious disease, although his opinion thereon has not yet become general, not having like the plague been sanctioned by the prejudices of centuries; and by examining into the circumstances connected with it, the misconceptions respecting contagion, as well as the misapplication of the term contagious, will be made very manifest. Here then is a disease, the genuine offspring of "inactivity, gloom, damp and unwholesome food," spreading amongst the crew of a ship; like every other disease, some are affected with it before others, and contiguity afterwards seems to regulate its progress. If perchance even a healthy person should be dropt among the sick, he soon becomes diseased. Let however an enemy heave in sight to rouse the crew, or let the sight of land cheer them, the disease readily vanishes; or let any one or the whole of them be removed to a healthy place, and it will communicate itself to no one. An ideal matter of contagion therefore in the above example, from contiguity and sameness of circumstances, is thus made the active agent; whilst these circumstances, viz. inactivity, the general causes resulting from damp and bad living, dejection of spirits communicating itself by sympathy to all within the sphere of sympathy, not to mention the unhealthy state of the scorbutic bodies, are not taken into account, or at most are only reckoned subordinate. Just so is it with respect to plague; just so is it with respect to all epidemic and endemial fevers. They come under parallel circumstances. We find this parallel in a recent instance of epidemic fever, which happened at Cadiz. We find this parallel in old hacknied instances which happened at the Oxford assizes, and the Old Baily. In the first instance, Sir James Fellowes, although he has scented out the whole track of the contagion, with the very spot whence it started, acquaints us that so soon as the inhabitants were roused by the bombardment of Cadiz, and that they began to leave the houses they had been shut up in, the fever took its departure. In the latter instances, arising as it is well known, from the sudden diffusion of mephitic air introduced into close and crowded court rooms, those infected, as it is admitted, propagated the disease to no one. But how different, let me ask, would circumstances have proved in the case of small-pox; and how improper therefore is the term "contagion" under circumstances where there is so wide a difference. If however this term is still to be retained, where without contiguity, and the same concatenation of circumstances, the disease cannot be propagated, it would at least be right to add the epithet "perishable" to it; since such contagion but vegetates on the spot, and would perish in the attempt to make it exotic. It were, however, far better to use a different term, and as expressive of a fact, that people are infected from an infectious atmosphere, &c.; "infection" may thus be used in contradistinction to "contagion." With such precision of language, we may then talk of the infection of the plague, equally as we would talk of the infection of yellow fever, or of the infection of influenza, without inspiring the alarm which a word at present synonymous with contagion, is calculated to do; nor would it be long, ere a general conviction should follow, (and the observations of an eminent physician,

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physician, when treating of the plague and yellow fever, are tantamount to this) that were it even possible to import a case of plague, the disease would not be propagated, unless at the same time Turkey climate and Turkey manners were imported along with it. But it is needless to mention our present state of society renders this impossible.

Is the opinion you give respecting fevers, founded on any ample source of actual observation and experience?—It is founded on my observation and experience while I resided in the Royal Infirmary of Edinburgh, for about three years, as physicians assistant or senior clerk; and in private practice I have not met with any circumstances to shake it. This hospital, during my time, received all the sick poor of the place, as well as those from His Majesty's naval and military forces stationed there.

What was the number of sick usually accommodated in this hospital?—I think the house could ordinarily accommodate from two to three hundred; sometimes it was very full, sometimes it was rather thin. At one time, whilst a fleet of Russian ships of war rendezvoused in Leith Roads, we had so great an influx of sick on us, that we were obliged to open additional wards and employ extra attendants. By far the greater proportion of the sick laboured under a bad fever, which prevailed on board their ships; I have seen, I dare say, as many as twenty brought to us in one day.

At what season of the year was fever most prevalent?—I think in the autumnal and winter months.

Were the patients ill of fever placed promiscuously through the different wards, with those labouring under other complaints?—No; we had two wards, called The Fever Wards, for male and female patients respectively; but yet these wards were not solely for cases of idiopathic fever, they were equally appropriated to the reception of other acute diseases or topical inflammations attended with symptomatic fever; as inflammation of the lungs and bowels, rheumatism, small-pox, &c. requiring greater quiet and stricter attendance. But I ought, however, to state, that there were two wards in the house open, during the sessions of the medical classes, where fever cases were received promiscuously with others; these were the clinical wards, entirely under the charge of some one of the medical professors of the university, appointed for the time being, to exemplify the practice of medicine to the students, and to deliver clinical lectures on the cases of the patients thus free at all times to their inspection.

Can you state to the Committee any facts, falling under your own experience and observation, with respect to the non-contagious nature of fever?—First, as to my own personal experience; I have to repeat, that I lived about three years in the Royal Infirmary of Edinburgh. It was my regular duty to visit the sick three times a day; in the forenoon, before the physician's visit; at mid-day, in company with the physician; and in the evening alone. This evening visit generally occupied a considerable time; since, at the bed-sides of the patients admitted through the day, I had to make memoranda in writing of every fact and circumstance connected with the case; ascertaining the state of the pulse, skin, &c. for the purpose of being recorded in the Journals of the House. Frequently this evening duty was exceedingly severe; it was particularly so during the time the Russian sick were received into the infirmary, when it was not unusual to receive on the same day, ten or a dozen fresh cases; most of these were bad fevers, and the subjects of them so exhausted,—some even in *articulo mortis*,—and withal so filthy and dirty, that I could not refrain from lending my assistance to strip of their clothes, and get them comfortably laid in bed. Notwithstanding all this exposure in my own person to every way by which it is conjectured febrile contagion is received, by breath, contiguity and contact; notwithstanding likewise, that I was called for successive nights out of bed to the fever ward, where I have remained administering in cases of extremity, wine and cordials, and occasionally obliged to draw off the water of the patient by means of the catheter, an operation necessarily exposing me to the effluvia arising whilst the bed clothes were turned down, yet I never caught fever. In the second place, as to my observation in the infirmary, I have to mention, that with the exception of the Russians, it was rarely, in the history the patients on admission gave of themselves, that contagion could be implied as the cause of fever, from their having been near others ill of it; in comparison to the great number where no such source of contagion could be recognized. The military from the castle, for instance, were free from suspicion of this kind; and so likewise, were many labourers suddenly seized with fever in the open fields during harvest. Nor did I observe, that any of those patients, whose cases required the quiet of the fever ward (although greatly debilitated from the treatment deemed necessary

necessary for inflammatory complaints) ever caught fever, although mixed and remaining convalescent with fever patients. Neither did I observe, when a patient in some of the other wards in the house (and I would particularly mention the lock-up or venereal ward, as the patients here were oftentimes much crowded) was seized with fever, as sometimes happened, that he communicated the disease to the patient whose bed was contiguous to his own; and much less, that it spread through the ward. I may add, that in the clinical wards, where fever patients were indiscriminately mixed with others, the disease never spread through it. In short, I will state, that I never saw an instance of contagious fever in the Royal Infirmary of Edinburgh; and if it be allowable, I may add the testimony of Dr. Rutherford, the able physician under whom I acted, to the same effect. He had been physician to the house for many years; and a man more accurate in observation, or more gifted with ability in his profession and enlightened by general science, is not, as the many who know his modesty will acknowledge, to be met with.

Would you attribute your own exemption from fever, as well as the fact that it was never propagated through the infirmary at Edinburgh, to any particular measures or precautions?—An idea prevails amongst the public, that medical people carry something about them to keep away infection. This however is erroneous. With respect to myself, I entered and did my duty in the fever ward as cheerfully as in the other wards of the house. Having had no fear about catching fever, I banished all dejection of mind, than which nothing can more favour an attack of fever. At the same time it is proper to observe, that those employed amongst the sick, cannot sufficiently often avail themselves of the opportunity of enjoying the pure fresh air; since the atmosphere of an hospital, vitiated by the effluvia and morbid excretions of a number of diseased people, cannot be wholesome. With respect to the prophylactic measures of the house, they consisted altogether in cleanliness, and good pure air, to which the excellent construction of the house, with its lofty and spacious wards, materially contributed. On a dry day, the windows were thrown down from the top. I do not recollect an instance of fumigation; and white-washing was ordinarily practised only once a year. Instead of wooden flooring, which for a long time retains the moisture left after scouring, our wards were paved with flat square tiles; and thus the hurtful effects of damp were obviated, as well perhaps as an impurity of the air. For there is reason to believe, that moisture long retained, suffers decomposition, wherein the hydrogen is given out whilst the oxygen is absorbed. Hence, in my opinion, the impropriety of frequently white-washing the rooms, and daily mopping the floors, under the idea of destroying contagion. At least I have repeatedly witnessed in private practice, every symptom of fever aggravated from scouring a sick chamber; and it is one of the first directions I give, to abstain from such practice.

We hear of frequent instances of medical men and others employed about the sick, becoming the victims of fever, what account do you render of this matter?—It really does not accord with my observation, that medical practitioners are frequently the subjects of fever. In the great plague of London, for instance, it is said only five physicians died of it; at the same time the sympathy of the public is now and then excited by reading in the newspapers an account of some victim to "contagious fever" through his philanthropy or ardour in the profession. But the idea which this is calculated to produce on the public mind, as to the contagious nature of fever, will, on a little reflection, be found very unjust and erroneous. For, in the first place, I may from my own knowledge state, that a great concourse of students, perhaps two hundred, perambulate the wards of the infirmary at Edinburgh daily, and yet in the course of the season, I will venture to say, that not two or three on an average are seized with it. And in like manner it may be affirmed, that the instances are rare where even the nurses employed night and day about the sick are seized with it. In the second place, admitting that instances of infection are as numerous as rumour would assign, there are circumstances casually present, and accidentally operating, to which such seizures ought in justice to be imputed, rather than to "contagion," which, according to the hypothesis, must always be present and always operating. I would here mention the peculiar circumstances attendant on medical students, many of whom are young men who have changed an active country life for a sedentary one in town; and above all, spending much of their time amid the putrid effluvia of a dissecting-room. And this leads me to particularize a fact, I learned in conversation with an eminent practitioner attached to Guy's hospital, very illustrative of the misconceptions which readily go abroad to the public about contagion, viz. that in some two or three deaths which happened amongst

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amongst the pupils, about a twelvemonth ago, the cause ought rather to have been placed to the destructive influence on the constitution, of the *septon*, with which in a manner their frames were saturated, than to the "contagious fever," about which there was so much talk. I would again call attention here to a circumstance I have already spoken of, and that is the atmosphere of an hospital, which at times, from some prevailing sickness crowding it, or other casualty, cannot miss to become, as it were endemial of disease amongst its inhabitants, or those frequenting it. Something of this kind happened in the infirmary at Edinburgh, in the beginning, when the filthy Russian sick overstocked the house, inasmuch as a few of those resident and living in it were infected by fever. But this very circumstance, whilst it showed the local influence of bad air, militated most strongly against the doctrine of contagion. For, of the very insignificant number I have stated to have been attacked by fever, the majority were in noways connected with the wards where the fever patients were placed; on the contrary, from the superior ventilation and cleanliness kept up in these wards, those employed about them appeared the most defended from the influence of the local and unwholesome atmosphere. Independently, however, of this fact, it is indisputable, that not one of those who had been seized with fever, when removed from the focus where they had caught their illness, communicated it to a single individual. In the third place, in corroboration of what I have stated, I would appeal to the evidence given before the Fever Committee, where, when due regard was had to cleanliness and ventilation, we can scarcely, *and not even scarcely*, recognise, that ever their "contagious fever" was propagated, although many at the same time lay in the same place ill of it. Having therefore on the one hand, a virtual admission to this effect, from the supporters of contagion themselves; and on the other hand, knowing that fever arises where fever-contagion never entered, as in the holds of ships, &c. &c. or from grief, fear, watchfulness, &c. &c.; nay, as it is certified to us by physicians of credit, that it has infected those going near a person in small-pox as well as in other complaints, is it not evidently absurd to talk of a specific contagion in fever, when such an endless variety of causes produce it? It seems here that we grasped at a shadow for a reality; and hence there cannot fail to be too many instances where, pursuing this "will-o'-the-wisp," and neglecting the true causes of fever, we have, by our measures, but added to the causes of mortality, which we busied ourselves about checking.

Much of the evidence you have delivered, being applicable to the doctrine of contagion in general; would you confine yourself to the plague, and give the Committee the result of your inquiries thereon?—The same views and principles which guide us in forming an opinion of the causes of fevers, must guide us in the plague; for if the causes of the plague are not identical with those of fevers, (and some authors on contagion say, that of the plague is identical with typhus) the difference is dependent on modifications of climate and atmosphere; just as a fever, generated from the same unhealthy causes a-board ship, shall vary in its phenomena according to the place where the ship may be. Moreover, the accounts given of the origin and introduction of the plague into places, are of a like complexion with those of fevers; and if the accounts here are now believed to be fabulous, it is fair to infer those of the plague are so likewise; particularly, as they seem even more marvellous; and would, I think, with any one not absolutely hoodwinked by the mists of contagion, carry their own contradiction with them: yet it is to these marvellous tales that the origin of the contagious nature of the plague is to be traced.

Could you furnish the Committee with some of the early accounts as to the plague?—The first I shall beg leave to mention is given by Alexander Benedictus, who tells us, that in consequence of shaking a feather-bed, which had been thrown aside in the corner of a house seven years before, a plague was raised at Wrateslaw, which carried off 5,900 people in twelve weeks. The same author gives an instance of the effects of the pestilential contagion, which had been shut up in a rag for fourteen years. Hieronymus Fracastorius and Forestus say, that about 1511, when the Germans were at Verona, twenty-five soldiers died, one after another, from putting on an old leathern coat; and that, ere the cause was discovered, 10,000 persons perished. The coat was then, very prudently, burnt. Another author, Victor Trincavellius, relates, that at Justinoples, in Italy, some cords which had been made use of in burying the dead of a former plague, twenty years before, infected the person who found them behind a box, and caused the death of 10,000 people. Our countryman, Dr. Mead, relates, on the authority of Sir Theodore Mayerne, that some clothes, fouled with blood and matter from plague sores, being lodged between matting and the walls of a house in Paris, gave the plague, several years after, to a workman

a workman who took them out, which presently spread through the city. The same author discovered that the Plague of London, 1665, was carried to Poole, in Dorsetshire, in a pedlar's pack, and to Eham, in the Peak of Derbyshire, by a tailor's box; but he leaves us in the dark as to the manner by which it was conveyed to other places in England, over a great part of which he says it spread.

Are you in any way acquainted with the histories of plague, in so far as it has visited different countries, for the last two or three centuries?—Ingram, who writes on the plague, gives an historical account of it, in this respect, from 1346 to 1665. I would only, however, beg leave to give the history of its invasions, for the first three years of this period; when observing a direction from about south-east to north-west, it travelled through China, India, Syria, Turkey, Greece, Egypt, Africa, Sicily, Italy, Pisa, Genoa, Savoy, Provence, Catalonia, Castile, Germany, Hungary, Flanders, Denmark and England. The bare recital of this carries with it the impossibility of accounting for the introduction of this scourge into so many places of the habitable globe, on any other principles than those of atmospheric influence. Even the notion of flights of birds transporting the contagion in their plumage, would obtain less credit, than a similar one, that its introduction into the houses of the Franks during their seclusion, may be caused by some importunate cat escaping from the cage where she had been confined, bringing it back in her tail.

Is it said in what part of England the plague at this time first appeared?—Dr. Russell, who has inquired into the subject, states, that it first appeared in the seaport towns of Dorsetshire; thence passed into Devonshire and Somersetshire as far as Bristol; and though the Gloucestershire people cut off all communication with that city, yet at length it reached Gloucester, Oxford and London. This was the great plague which happened in Edward the Third's time; and we have it from history, that whilst Edward, and his rival Philip of France, were thinning the inhabitants of either country by their sanguinary conflicts, pestilence carried off one-fourth of the inhabitants of the western world. London, as might be expected in those days, suffered the full force of its raging violence, for in one year there were above 50,000 buried in Charter-house churchyard.

You are doubtless aware of the accounts that have been given of the introduction of the plague into London in 1665, and into Marseilles in 1720?—There is not a shadow of proof of the importation of the plague into London in 1665, as is said, from Holland, where it is stated to have been brought by a bale of cotton from Turkey. It seems a bare assertion of Dr. Hodges. This same Dr. Hodges tells us, that the first instances of it occurred in Westminster, where about the end of December 1664 two or three people died suddenly in one family. Other accounts state its first appearance to have been in like crowded and unhealthy places, viz. St. Giles and Clare-market; all of which, I may observe, are places remote from the Custom-house or quays, near which, on the supposition of its importation, it should rather have broken out. If, however, it did appear in December 1664, it must have slept a good deal; for by the bills of mortality only four died of it, from its very first appearance till the second week of May 1665. It was in June it began to spread, sometimes being in one part of the town, and sometimes in another. It reached its height in September, and in December it very suddenly subsided. As to that of Marseilles again, the King's physicians, sent expressly to investigate the cause of the plague there, broadly deny that it came by *Chataud's* vessel. But the accounts themselves of this vessel bringing it, carry on their face strong marks of improbability. In the first place, there was a clean bill of health from the place the ship took in her cargo. She left Sidon, on the coast of Syria, the 31st January 1720, and did not arrive at Marseilles till the 25th of May, making a long voyage of four months. In the second place, admitting the plague was on board of this ship, how happened it, that after three of her crew died at Leghorn, none of the rest should have fallen sick till two days after her arrival at Marseilles, when one of the sailors died. And it is here proper to observe, that although she put into Leghorn, where these men died, she did not carry the disease there; on the contrary, the physician and surgeon of the lazaretto there, after inspection, granted a certificate that these men died of a malignant fever, the consequence of bad provisions, a circumstance very likely to occur from the length and badness of the voyage. In the third place, how happened it, that a cabin boy, who must all along have been with the ship, did not die till some time after a quarantine officer, who had been put on board on her arrival at Marseilles, died? The quarantine officer died on the 12th of June, and the cabin boy on the 23d. But besides this ship of *Chataud's*, the contagionists of those days were obliged to have recourse to other ships for bringing the

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the contagion ; viz. a Captain *Gabriel's* arriving on the 13th of June, and a Captain *Ailland's* arriving on the 23d from Sidon. Both these ships, however, having brought foul bills, were placed under strict quarantine. Last of all, they are obliged to give countenance to an idea, that the crews of all the different vessels smuggled small parcels of their goods, in order to account for the disease appearing in different quarters of the city, particularly in the Rue de l'Escale, a filthy part of Marseilles, like our St. Giles. There chances, however, to be a gratuitous admission on the part of the medical attendants of the lazaretto, that a bad fever had been previously prevailing ; and Monsieur Didier, the physician, gives some cases which occurred even before the arrival of *Chataud's* vessel, bearing every resemblance to the plague, inasmuch as parotids and carbuncles were amongst the symptoms.

Are you acquainted with any author later than Dr. Russell, who has written, from his own experience, on the plague ?—Yes ; Assalini, in particular, writes entirely from his own experience in Egypt. He traces, with the greatest care, the progress of the plague in the French armies ; and whilst he clearly shows its local origin, he satisfactorily disproves its spreading by communication. It appeared amongst the French army sometime after the taking of Jaffa ; and it occurred amongst a division of them in Syria after crossing the Desert. Whilst it was raging in Alexandria and Damietta, it did not spread to them in Upper Egypt, notwithstanding that men and officers and packets were daily arriving from those places. He states the same fact as to soldiers arriving from Syria. So far indeed were the French from fearing the plague would spread by communication, that it was a practice they came to adopt, of removing not only individuals but troops from unhealthy spots ; because they found this the best means both of recovering the sick, and of checking the spreading of the disease. Assalini's statements receive the fullest corroboration from an author of great respectability and intelligence, Sir Robert Wilson. As what he says on this subject, in his history of the Expedition to Egypt, is very much to the purpose, I would beg leave to quote a passage. “ The fact (he says) must be stated, that the English and Turkish armies which marched to Cairo, passed through a country where the plague filled almost every village ; that they communicated, without any precautions, in the most intimate manner with the natives, established their ovens at Menouf, where the plague raged violently ; that the Turks even rifled the diseased in the pesthouses of Rhamanieh, and at Cairo dug up the corpses recently buried, and yet that no individual instance occurred of the malady in the armies ; whilst the troops, who remained stationary at Aboukir, were severely afflicted, and of whom 173 died : yet neither at Rosetta, nor Alexandria, did the fever show itself.” Both these authors bear ample testimony against the assertion, that the plague is annually imported into Egypt and Syria, from old clothes and merchandize coming to Alexandria from Turkey, since the English strictly blockaded the coast for four years, and yet it generated annually. Assalini pays no regard to another assertion made, attributing it to goods left infected in the magazines at Alexandria and Damietta, the year before ; nor can any one give attention to such an assertion, after he shall hear what Dr. Hodges says of the plague in London, in 1665 :—“ The people, (he states,) who had retired into the country, were so little afraid of the infection being preserved in linen or household goods, that on their return to town, they without any scruple entered the rooms of the sick, before the people were quite dead, and went into the beds, where the sick expired, even before they were cold, and before they were cleansed from the stench of the deceased ; *but yet none caught the distemper.*” I may add, that I have been informed, that when the plague appears at Smyrna or Constantinople, it always first shows itself in the bazaars, and in those where cloths and skins are usually sold ; and I have been told by the same authority, that the bazaars in those cities are close covered streets ; precisely the sort of ill-aired places, where mephitic vapour is likely to be engendered among clothes and skins. This mephitic vapour may be a cause of fever, although it is a very different thing from a specific virus.

Does Assalini give any particular instances to disprove the propagation of plague communication ?—Yes ; he says, “ As soon as any one of our men was attacked, two Turks led or carried him to the hospital. There is no doubt that several of them shared the clothes of infected persons, without contracting the disease.” In another place he states, that three soldiers ill of it, and admitted into an hospital, died two days after ; but that of sixty persons with whom they had intercourse in this hospital, not one was seized with it. Desegnette and Larray, the one physician in chief, the other surgeon to the army, exposed themselves freely without taking the disease. Larray, besides performing the operations in the disease, examined several

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of the dead bodies; and Desegnette shewed Assalini two punctures, which he had made on himself with a lancet dipped in the pus of a buboe. In opening the buboe of an officer, the pus and corrupted blood spouted on his own hands. He has slept in the sheets which had been washed by a female patient, who died the day after. A young German, the wife of one of the soldiers, came to consult him, and during his absence, laid herself on his bed for a quarter of an hour; he went to visit her the following day, and found her expiring. He amputated the thigh of a soldier, whom he found to be in a pretty tolerable state the day after, and who ultimately perfectly recovered; although he was placed between two men who died of the plague with buboes, the night after.

Do authors on the plague specify any period after exposure or contact, that the disease seizes?—We have some wonderful accounts of the subtlety and instantaneous effects of the plague contagion. Thus Boccacio, in his description of the plague at Florence in 1348, relates that he saw, with his own eyes, two hogs instantly fall into convulsions, and die in less than two hours, after snuffling about with their snouts, and gnawing some pieces of bread that had been thrown out of the house of a poor man dead of the plague. Forestus tells us of a young man seized with the disease, only by thrusting his hand into an old trunk, wherein was a spider's web, which in an instant raised a plague sore. There is a like story in Van Swieten, of an apothecary who was seized with a blister and carbuncle on the leg, only from kicking up some straw in which his servant, ill of the plague, had lain eight months before. The carbuncle took a long time to heal, but he received no other injury with respect to his health. Another person was seized with the plague, only from holding a bit of thread. A woman of Zealand removed into Almeria in Germany, having exposed some clothes to the sun, some children playing on them, received the infection, and all died. A man dropped down dead of the plague, by standing on a Turkey carpet. A lady by smelling at a Turkey handkerchief, died of the plague on the spot. It is needless to observe, that such stories (and a long string more of them might be added) are by no means consonant with the general laws of the animal economy. But they receive a direct contradiction from Russell himself. Amongst the many thousands he saw ill of plague, he says he never met with an instance where the person was sensible of the stroke of contagion at the time. He thinks he has seen examples after some hours, as well as after two three or more days. He does not think he met with any longer than ten. As there are like traditions about people struck down and dying in opening bales of goods in the lazarettos, I would beg leave to give Assalini's report thereon. "It has often been said, that in breaking open a letter, or on opening a bale of cotton, containing the germ of the plague, men have been struck down and killed by the pestilential vapours. I have never been able to meet with a single eye-witness of this fact, notwithstanding the inquiries which I have made in the lazarettos of Marseilles, of Toulon, of Genoa, Spezia, Livournia, Malta, and in the Levant; all agree in repeating that they have heard of such an occurrence, but that they have never seen it happen. Among those whom I have interrogated about this fact, I may name Citizen Martin, captain of the lazaretto of Marseilles, who for thirty years past, has held that situation. This brave and respectable man told me, that during that time he had seen opened and emptied some millions of bales of cotton, silk, fur, feathers, and other goods, coming from several places where the plague raged, without having ever seen a single accident of the kind."

Do you consider it likely, from the nature of it, that facts tending to prove contagion are likely to be ascertained?—Not so likely as those that prove against.

Then they can only be presumptive facts?—Only.

Why?—Because the people who take disease are exposed to the very same causes of disease; bad air, the same way of living, and other circumstances connected with contiguity.

Have you ever heard of plague in England since 1665?—No, never.

If infection had arrived at any of the quarantine establishments, it is probable that some of the inspectors of goods must have taken the plague?—If it was infectious like the small-pox, they must.

To what do you attribute their not having taken the plague?—Because it was never brought.

Do you suppose the plague of 1665 to have been imported?—No.

Do you consider the fact of the plague not having appeared at the quarantine establishments for 100 years, to be any sufficient reason to infer from thence, that the plague was not imported?—There is the strongest reason to believe, that if in the course

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of 100 years it has not been imported, it is incapable of being imported; because Russell and various other authors tell you, that the quarantine laws are frequently eluded, and that ships may have clean bills of health before they were aware that the disease had broken out.

What do you think is the effect, notwithstanding the plague has never appeared in quarantine establishments, of persons being constantly shut up for 15 and 20 days?—It is hurtful to their health.

But do you suppose there is any reason for it, from the occurrences that have taken place?—I cannot see any reason for it.

Do you consider the plague not having appeared in persons arriving at the quarantine establishments, as any reason to infer that it has not arrived also in goods?—I think there is no reason whatever to infer that it has arrived in goods.

Is the contagion of plague any thing similar to that of small-pox?—The contagion of small-pox is a specific matter, and no cause whatever but itself will produce small-pox; but as to plague, it is supposed to be produced from a great number of causes.

Do you consider that the seeds or causes of small-pox remained latent from year to year, and are brought into action by the atmosphere or some other causes?—I think they do.

Do you suppose the plague is revived in the same manner, continuing from seeds or some causes lying dormant all the winter?—No, I do not.

How do you account for its revival annually?—It happens from several causes combined; for instance, in Turkey it breaks out at stated times there.

Owing to what?—The chief exciting cause seems to be the particular state of the air and winds blowing from certain quarters, from the south.

And do you suppose that to be the whole cause, and no seed?—My opinion is, that no seed is ever left by it.

So that it is from the same causes recurring annually?—The same causes recurring annually, and the filth and dirt of the people.

Do you consider the quarantine establishments of any use?—No; except so far as places to air goods that may have engendered mephitic stench or vapours in the course of the voyage, such as woollens, skins, &c.

Do you consider the plague contagious?—No.

Do you consider that the contagion of plague is mere matter of fact, which any person can ascertain as well as medical men; or do you think the means of judging of its existence belongs peculiarly to professional men?—It is matter of fact which every person may examine; but medical men, from their knowledge of diseases and the analogy they can draw in them, may throw a good deal more light upon the subject, and explain the causes much better, than persons not acquainted with the science of medicine.

What is the fair and rational criterion to establish the existence of contagion?—The same effect should always follow the same cause. If, for instance, we find, that no cause whatever but itself will produce small-pox, or communicate it to others, we have fair ground for considering it as a contagious disease. But if we find a vast variety of causes will produce fever, we should hesitate before we come to the direct conclusion, that it is a contagious fever.

Is it not a satisfactory proof of contagion, that a person, removing from one lodging to another, communicates the same disease to some other person?—That is a strong proof of contagion, and it is what happens in the small-pox, or measles.

In cases of fever, where persons have been removed to some other place, and have not communicated the fever to any body else, you would naturally conclude, that that fever was not contagious?—Yes.

What was the consequence of the Black Assize of Oxford in 1657?—I think I have already stated, that the illness was communicated to almost every one present.

How many took the disease?—I think it is stated, about 300 died in Oxford.

Was it ascertained as a fact, that any one of those 300 communicated it to any other person?—As far as my recollection serves, there was no instance of the kind; but there is a similar instance recorded, as having occurred at the Old Baily sessions. Sir John Pringle tells you, that the fever did not spread, there being, in his opinion, no particular state of the air to favour the spreading of that fever.

State to the Committee the cause of the infection at the Black Assizes at Oxford?—It is stated to have been owing to the great number of people who had been brought out of a gaol, loaded with filthy clothes, and every kind of mephitic exhalation about them; and as soon as they came into the air, the mephitic vapours they thus

thus introduced, produced the same sort of effect upon the surrounding auditory, as the unhealthy winds which prevail in Africa, and which are said to be sufficient to knock a person down.

Did the judge take it?—I think it is stated, that all that were there took it.

Do you consider that malignant fever at all similar to the plague, or going under the general classification that includes plague?—It may be included under the general description of plague; for plague may be considered under the general description of fever.

Does the same medical classification include that of fever and plague?—Medical classifications are quite arbitrary. If you look at the broad face of nature, you must include plague under fever, and consequently fever and plague under the same classification.

Is it within your knowledge, whether the persons whom you have before described as being brought into court at the Black Assizes at Oxford, were labouring under disease?—I think it is stated that they were not.

Charles M'Lean, M. D. called in; and again Examined.

DO you wish to add any thing to what you have already stated in evidence?—I beg permission of the Committee to offer some emendations and additions, which I deem necessary to complete my evidence. In regard to my definition of epidemic diseases, I would amend it thus: "Epidemic are generally diseases produced by such causes as are capable of simultaneously operating upon any given portion or the whole of a community, and of affecting in a similar manner the same persons repeatedly, even in the same epidemic, and the same season." An epidemic which proves mortal to great numbers, is called a pestilence. For my former definition of contagious diseases, I request to substitute that which follows: "Contagious diseases are such maladies as are capable of being propagated in a certain succession, by means of a specific virus, by contact of a sick person with a person in health, to all who have not become unsusceptible of its infection, or are not at the time labouring under a disease of an equal or greater degree, but incapable of being produced by any other cause. The matter thus propagated from person to person is called 'Contagion,' the contagion of small-pox, &c. 3. 'Infection' includes contagion, and differs from it only in being more comprehensive." An infectious disease is a disease capable of being propagated by means of a specific virus, whether by contact of persons, by the air, (the qualities of the air itself are not here meant, it is considered merely as a vehicle) or by goods, wares or merchandize, to all persons circumstanced as described in the preceding definition, but incapable of being produced by any other cause. In respect to general diseases, their virus is capable of infecting the same person only once. If it were even true, that in *some* cases the small-pox is capable of affecting the same person repeatedly, such cases would constitute only exceptions to the general rule, and could not affect the general argument. The state of persons or cities afflicted with a disease propagated by specific virus, whether it be communicated by contact of persons, or by any of the other specified modes of infection, or supposed to be so propagated, is always, and only designated by the term "infected;" an infected person, an infected city. The application of the same term to the state of persons or cities labouring under diseases occasioned by the noxious qualities of the atmosphere, or the other causes of epidemic diseases, is therefore obviously improper, and productive of an injurious confusion of ideas. 4. To the question, whether I have, of my own knowledge, known the plague to occur, without the disease spreading, I answered in the negative, conceiving it at the time to relate solely to cases of imported plague; but finding, upon reflection, that the question may admit of a much wider interpretation, it appears necessary, in order to be correct, that my answer should be different. The instances of plague affecting individuals, without the disease being propagated, which came under my immediate observation, whilst at the Pest Hospital, near the Seven Towers, are remarkable; and, in my opinion, conclusive of the question. Three successive priests, the purveyor, the interpreter, and all the attendants on the sick; several persons who were in the hospital for sore legs, or other local ailments; and some poor women and children, in health, who were there upon charity, amounting in all to about 20 persons, were not in any single instance, affected with the disease, although there was a constant succession of pestilential patients; and although a great proportion of the persons mentioned were *ex officio* necessarily in frequent contact with the sick; and many

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of the others slept in the same apartments with them. The purveyor, or some of the servants, went of course daily to the bazaars or markets, to purchase provisions, and to dispose of the clothes or other property of the dead, and without using any precautions, or occasioning any alarm. I have myself, with the interpreter, repeatedly walked into that part of Constantinople, which leads to the Golden Gate, in the vicinity of the Seven Towers, several times even during my illness, and entered coffee-houses, or traversed chaans and bazaars in the body of the town, frequently in collision with the passing multitudes; assured that there was no danger of my communicating the disease to any one, either directly in consequence of my own malady, or indirectly from the patients; and finding that no apprehension of such a danger was entertained by the inhabitants of that quarter (being chiefly Mahommedans) although they must have been generally aware, that we came from the Greek Pesthouse, there being no other persons in the Frank dress, or but very rarely to be seen in that part of the town. But neither from this communication, nor from the constant transfer of the clothes of the dead, was any malady propagated; for this obvious reason, that, although the cases which did occur, were in general of sufficient intensity to prove fatal, the epidemic constitution of the air did not prevail so uniformly, or to such a degree, as to render its effects liable to be confounded with those of a specific contagion. To the reasons which I have already assigned, for considering epidemic and pestilential diseases as never depending upon contagion; I beg to add the following. 1. Generally, because the laws of epidemic and those of contagious diseases, as I stated in my work upon the subject, are not only different, but incompatible; and because pestilences observe exclusively the laws of epidemics, of which they are but the higher degrees. 2. Because no adequate proof has ever, in any single instance, been adduced of the existence of contagion in pestilence. From its first promulgation to the present day, the doctrine has been nothing more than a series of gratuitous assumptions. 3. Because had pestilential diseases been contagious, consequences must have followed, which have not taken place. Being capable of affecting the same persons repeatedly, they would never cease, where no precautions are employed (and in such case no precautions could avail,) until communities were extinguished: Turkey would long ago have been a desert. 4. Because phenomena now take place, which, if pestilence were contagious, could not happen. Instead of the laws of epidemic, they would observe only those of contagious diseases. 5. Because a superabundance of irrefragable proof has been adduced, showing that pestilence never arises from contagion; and because the assumption resorted to, in order to elude this proof, that "to the effect of contagion, a particular state of the atmosphere is necessary to produce the disease," is only, in other words, an acknowledgement that a particular state of the atmosphere is its real cause. 6. Because, for centuries before any intercourse, direct or indirect, was established between this country and the Levant, or rather as far back as history extends, pestilence was at least as frequent in England, as in the 16th and 17th centuries, when our commercial intercourse with Turkey was considerable. 7. Because, when the free states of Italy traded both with the Levant, and with the north of Europe; when they were the carriers, not only of the merchandize, but of the troops of the principal powers of Christendom, engaged in the crusades; and when they possessed Smyrna, Cyprus, Candia, Scio, Cephalonia, Caffa, and even Pera, a suburb of Constantinople, no apprehension was then entertained, under a constant intercourse, of pestilence being propagated by infection, nor any precautions adopted by any nation for the prevention of such a calamity. 8. Because, during the century and a half which has elapsed since 1665, and in which there has been no plague in England, our commerce and intercourse with the Levant have been more extensive, and more rapid than at any former period. 9. Because there is no reason to believe, that in modern times, pestilences have undergone any revolution, in respect either to their nature or to other causes, further than may depend upon the advancement or retrogradation of countries respectively, in cultivation, civilization, and the arts of life; or upon an alteration in the seasons. 10. Because, as contagion, where it does exist, is sufficiently palpable, (it did not require the evidence of inoculation to show that small-pox depends always upon that source, and never upon any other,) if it were the cause of pestilence, its existence could not, for thousands of years, have remained concealed. It must have been discovered, and demonstrated to the satisfaction of the world, by the ancient physicians; and could not now have been a subject of controversy among their successors. 11. Because no person has at any period of history been known to arrive in England, from the Levant, labouring under pestilence. 12. Because no person employed in purifying goods in
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the lazarettos of England or of Malta, has ever been known to be affected with pestilence, which could not have happened if contagion had existed in the goods; and because such goods could not be uniformly exempt from contagion in particular countries, if that were the cause of plague. If in other countries, expurgators of goods in lazarettos have been known to be affected, it must have been from other causes.

13. Because, after three hundred thousand deaths from plague have happened in one season, in Grand Cairo, two hundred thousand in Constantinople, and one hundred thousand in Smyrna, as we are told has repeatedly occurred in those places, and the clothes of the dead have been worn by their surviving relatives, or sold in the bazaars, and worn by the purchasers, the disease, instead of spreading wider and wider, as would inevitably have happened, if contagion were its cause, (since in that case it could not fail to be carried in the clothes,) has on the contrary, regularly declined and ceased, at the usual periods. 14. Because, in those countries in which the plague is supposed to be introduced by means of contagion, conveyed by travellers or goods, as Egypt, Asia Minor and Syria, it never occurs epidemically, but at particular seasons; although in the other seasons, travellers and goods from places in which the disease prevails, continue equally to arrive. And because in other countries, as Persia, which maintain a similar uninterrupted intercourse with places liable to frequent attacks of plague, that disease never occurs. For detailed illustrations of the facts and inferences stated in my evidence, as well as for proofs of other matters which I may have omitted to state, I beg to refer the Committee to my printed work, intituled "Results of an investigation respecting Epidemic and Pestilential Diseases, including Researches in the Levant, concerning the Plague," and to the summary, which I have presented to them in manuscript, on the subject of epidemic diseases. In conclusion, I may observe, that the question of contagion in epidemic diseases, as acknowledged even by its advocates, is entirely one of fact, not of physic, of which all persons of liberal education are as competent to judge as physicians; and that plague does not, according to the modern misapplication of the term, designate any particular disease, but is the general name of several calamities.

135
Charles McLean,
M. D.

(18 May.)

APPENDIX.

- N^o 1.—Letter from the Council Office, Whitehall, to the Chairman of the Committee, enclosing Correspondence with the College of Physicians - - - p. 99.
- N^o 2.—Letter from the Office of Committee of Privy Council for Trade, to the Chairman of the Committee, enclosing Letter from Sir James Gambier, His Majesty's Consul in the Netherlands - - - - - p. 100.
- N^o 3.—Letter from the Commissioners of the Customs to S. R. Lushington, Esq. enclosing, Abstract of the Reports received from the Collectors and Comptrollers at Rochester, Portsmouth, Falmouth, Milford, Bristol, Liverpool and Hull, in return to the Board's order of inquiry, respecting Quarantine and Plague cases - - - - - p. 101.

APPENDIX.

—N° 1.—

SIR,

Council Office, Whitehall, 13th March 1819.

Appendix,
N° 1.

IN conformity with the orders of the Select Committee, dated the 11th instant, respecting the Contagion of the Plague; I herewith transmit to you the following Correspondence;—viz.

- 1st.—Copy of a Letter from Mr. Buller to the College of Physicians, with the first Volume of Dr. Maclean's work, with the Copy of a Summary of his Arguments thereon.—Dated the 16th February 1818.
- 2d.—Copy of a Letter from the College of Physicians, in Answer thereto.—Dated the 31st March 1818.
- 3d.—Copy of a Letter from Mr. Buller to the College of Physicians, with the second Volume of Dr. Maclean's work.—Dated the 30th September 1818.
- 4th.—Copy of a Letter from the College of Physicians, in Answer thereto.—Dated the 7th November 1818.

I am, Sir, your most obedient humble Servant,

CHEYWYND.

Sir John Jackson, Bart.

Chairman of the Select Committee
respecting the Contagion of the Plague.

(Copy.)—Enclosure 1.

SIR,

Council Office, Whitehall, 16th February 1818.

I AM directed by the Lords of His Majesty's Most Honourable Privy Council to acquaint you, that their attention has recently been called to a Publication by Dr. Charles Maclean, which he has communicated to their Lordships, on the subject of Epidemic and Contagious Diseases, and particularly with reference to the Plague.

The subject is obviously of so much importance to the welfare of mankind in general, that the Lords of the Privy Council do not feel that they could pass by Dr. Maclean's communication without notice; and their Lordships naturally look to the enlightened Members of the Royal College of Physicians, as being eminently calculated to furnish them with the most valuable information, and to elucidate a subject which is no less interesting than difficult; under this impression their Lordships have directed me to transmit to you a copy of the printed volume, published by Dr. Maclean, together with a written summary of his argument, which the Doctor has prepared by their Lordships direction; and to request that you will submit the same to the consideration of the Members of the Royal College of Physicians, in order that they may report, for the information of the Lords of his Majesty's Most Honourable Privy Council, the view which the College take of this question, and more particularly, their opinion on the following propositions, as stated by Dr. Maclean, viz.

- 1st.—Whether it be sufficiently proved, that Epidemic Diseases do not depend upon Contagion, and that consequently, quarantine and other regulations of plague police are not only useless but pernicious.
- 2d.—If not, what additional proofs are considered necessary.
- 3d.—Whether the doctrine of Contagion, as the cause of Epidemic Diseases, be still deemed to stand in whole or in part, confirmed and unshaken, and all the establishments founded upon it worthy of being continued.

I am, Sir, your most obedient humble Servant,

The President of the
Royal College of Physicians.

(Signed)

JA. BULLER.

Appendix,
N° 1.

(Copy.)—Enclosure 2.

SIR,

College of Physicians, March 31, 1818.

I HAVE the honour to transmit to you, for the information of the Lords of His Majesty's Most Honourable Privy Council, the following Answers to the Questions proposed by their Lordships to the Royal College of Physicians :—

1st.—We are of opinion, although some Epidemic Diseases are not propagated by Contagion, that is it by no means proved that the Plague is not contagious, or that the regulations of plague police are useless or pernicious. We are persuaded, on the contrary, from the consideration of the experience of all ages, and some of us from personal observation, that the disease is communicable from one individual to another.

2d.—The additional proofs which would be required of the non-existence of Contagion, must be such proofs as would be sufficient to counterbalance the general opinion of medical and philosophical authors and historians, from the times of Thucydides, Aristotle and Galen, to the present day; so late as the year 1813, the contagious nature of Plague was fully ascertained by the British medical officers in the Island of Malta.

3d.—The doctrine of Contagion appears to us to be wholly “unshaken” by any argument which Dr. Maclean has advanced; at the same time we think it probable, that some of the personal restrictions enforced on the establishments for quarantine, might be modified, without risque to the public safety.

I have the honour to be, Sir, your most obedient Servant,
(Signed) CLEM. HUE, Registrar.

To James Buller, Esq.
Council Office, Whitehall.

(Copy.)—Enclosure 3.

SIR,

Council Office, Whitehall, 30th September 1818.

I AM directed to acquaint you, that the Lords of His Majesty's Most Honourable Privy Council have, since the receipt of your letter of the 31st March last, received from Dr. Maclean a second Volume of his Work on the Non-contagious Nature of the Plague, which the Doctor has represented to their Lordships, as containing additional proofs of the accuracy of his views upon that subject; and as being in consequence not unlikely to lead to some variation in the sentiments of the College of Physicians. Although the Lords of the Privy Council cannot undertake to say how far this may be the case, the importance of the subject induces them again to bring it under the consideration of the College of Physicians; and I am therefore directed to transmit to you, a copy of the second Volume of this Work, and to request that you will lay the same before the College for that purpose.

I am, Sir, your most obedient humble Servant,

Clement Hue, Esq.
Registrar of the College of Physicians.

(Signed) JA^s BULLER.

(Copy.)—Enclosure 4.

SIR,

College of Physicians, November 7, 1818.

I AM directed by the President and Fellows of the Royal College of Physicians, to acknowledge the receipt of your letter of the 30th September; together with a Copy of the 2d Volume of Dr. Maclean's Work on Epidemic and Pestilential Diseases, and to state to you, for the information of the Lords of His Majesty's Most Honourable Privy Council, that nothing contained in Dr. Maclean's second Volume, has altered the opinion expressed by the College in their former report.

I have the honour to be, Sir, your most obedient Servant,

James Buller, Esq.

(Signed)

CLEM. HUE, Registrar.

Appendix, N° 2.

Appendix,
N° 2.

SIR,

Office of Committee of Privy Council for Trade,
Whitehall, 20th April 1819.

BY direction of the Lords of the Committee of Privy Council for Trade, I have the honour herewith to transmit, for the information of the Select Committee, respecting the Contagion of the Plague, Copy of a Letter from Sir James Gambier, His Majesty's Consul in the Netherlands, on the subject of the Quarantine Regulations established in that kingdom: I am to add, that the translation of the Quarantine Laws to which Sir James Gambier alludes, has not yet been received at this office.

I have the honour to be, Sir,

Your most obedient humble Servant,

Sir John Jackson, Bart.
&c. &c. &c.

THOMAS LACK.

(Copy)

(Copy.)—Enclosure.

SIR,

The Hague, 3 April 1819.

IN compliance with Lord Castlereagh's desire, communicated to me in your letter of the 16th ult. I have made inquiry respecting the Quarantine Regulations established in the United Netherlands, and find that the following is the system now practised in this regard:

No vessels whatever of any nation arriving in these ports are subjected to quarantine, excepting such alone as come from the coast of Barbary. These latter are immediately visited, and carefully inspected by a medical person, who reports thereon to the Marine Department at the Hague, which department determines, from the nature of the report, to what extent quarantine shall be enforced in the particular case. The vessel in the interim remains under the surveillance of a guard-ship.

I have obtained from the Minister of Marine printed copies of the several laws and ordinances of the kingdom, relating to this subject; but as these have been delivered to me in the Dutch language (they being not extant in any other), I have taken measures to get translations thereof, which I shall transmit to the Foreign Office. This, however, cannot be immediately effected, as they are rather voluminous.

The Minister of Marine has likewise informed me, that a commission has been appointed by the King of the Netherlands, to inquire into the subject of the Quarantine Laws, to report thereon, and to suggest any further regulations that may be considered necessary.

I have, &c.

(Signed)

J. GAMBIER.

J. Planta, Esq. &c. &c. &c.

Appendix, N° 3.

SIR,

THE Commissioners having received an order from the Select Committee of the Honourable the House of Commons, respecting the Contagion of the Plague, dated the 11th instant, directing that there be laid before that Committee,

Appendix,
N° 3.

"An Account of all cases of absolute Plague in any Lazarette in this kingdom, from 1619 to the present time;"

I have it in command to transmit to you an Abstract of the Reports received from the Collectors and Controllers of this Revenue at the Quarantine Ports on this subject; and to signify the request of this Board, that the Lords Commissioners of His Majesty's Treasury will, agreeably to their Lordships standing order, be pleased to be the means of the same being presented to the before-mentioned Committee.

Custom House, London,
29th March 1819.

I am, Sir,
Your most obedient and very humble Servant,
D. CURLING,
in the Secretary's absence.

S. R. Lushington, Esq.
&c. &c. &c.

Enclosure in N° 3.

ABSTRACT of the Reports received from the Collectors and Comptrollers at Rochester, Portsmouth, Falmouth, Milford, Bristol, Liverpool and Hull, in return to the Board's Order of Inquiry, on an Order of the Select Committee of the Honourable House of Commons, respecting the Contagion of the Plague.

ROCHESTER.—The books and records at this port do not go farther back than the year 1716. A proclamation relative to Quarantine appears to have been issued on the 25th August 1720, and the first regular Quarantine establishment appointed at that time, although in a letter in 1722, allusion is made to the former Quarantine in 1709, when sheds were erected for airing goods at Hoo Fort. In the year 1721, permission was granted to air goods on the decks of the importing ships, or in hired craft; and this practice seems to have continued until the year 1755, when the first floating lazarette was established at Standgate Creek.

There is not any record of a case of absolute Plague in any lazarette at this port having occurred, from the earliest period that can be traced to the present time; but the following cases of strong suspicion, as to the cargoes of the ships being contagious, appear to have occurred:—

In 1721, the ships "Turkey Merchant," and "Bristol," with their cargoes, were taken from Standgate Creek out to sea, and burnt, in pursuance of an Order in Council, dated the 28th July 1721.

In 1792, a chest of goods burnt, imported in the "St. George," from Zante.

In 1800, the ships "Aurora," "Mentor," and "Lark," from Mogadore, were destroyed, with their cargoes, pursuant to an Order in Council of the 7th January 1800 (grounded upon a representation of the committee, consisting of His Majesty's physician and others), great suspicion being entertained of the same being infected with the Plague. The master of the "Lark" died at Mogadore, where the disease was raging at the time the vessels sailed; and it was reported, that nearly all the persons who assisted in loading the ships, also died of the plague.

Appendix,
N^o 3.

In August 1814, a large quantity of hare skins, imported in the "Lucy," from Smyrna, were burnt by order of Dr. Pym, upon a report made to the Lords of the Privy Council, from the Consul at Smyrna, that the persons who were employed in removing and packing the said skins, had died of the Plague.

PORTSMOUTH.—It cannot be ascertained, that any case of absolute Plague has ever occurred at this port, on board any lazarette. No regular lazarette was appointed until the year 1805, previous to which time it was the usage to hire vessels for the airing of goods.

FALMOUTH.—The officers at this port are not aware that any case of what is usually called Plague, has occurred; but have stated, that a disease, highly contagious, has frequently occurred there, and been arrested by precautionary means.

MILFORD.—No case of absolute Plague has occurred at this port. The first lazarette established here, was in the year 1806; previous to which it was the practice to hire vessels to air goods on board, subject to Quarantine.

BRISTOL.—No instance is on record of any case of absolute Plague having occurred at this port, from 1619 to the present time. Lazarettes were first established, pursuant to the Act of the 26 Geo. 2, cap. 6; prior to the passing of which Act, no information can be obtained as to what regulations were adopted for the due performance of Quarantine.

LIVERPOOL.—The officers at this port have not any knowledge of the Plague having had existence in any lazarette, or other vessel there. The first regular lazarette was appointed in the year 1815; and previous to that time, and for about forty years before, it was the practice to hire vessels to air enumerated goods on board, and prior to that period, such goods were aired on board the importing vessel.

HULL.—The officers at this port cannot find recorded in their books, a case of absolute Plague in any lazarette, during the last 200 years.

Hired lazarettes were first employed at this port in the year 1774; before which time it was the usage to employ labourers on board the vessels placed under Quarantine, in airing their cargoes.

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R E P O R T
FROM
THE SELECT COMMITTEE
APPOINTED
TO ENQUIRE INTO THE STATE OF
L U N A T I C S.

Ordered to be printed 15th July,
1807.

THE REPORT - - - - - pp. 3 to 7.

THE APPENDIX - - - - - pp. 11 to 27.

R E P O R T.

The SELECT COMMITTEE, appointed to enquire into the State of the CRIMINAL and PAUPER LUNATICS, in *England* and *Wales*, and of the Laws relating thereto; and who were empowered to report their Observations and Opinions, together with their Proceedings, from time to time, to the House;—

HAVE enquired into the matter to them referred, and have agreed upon the following REPORT.

YOUR Committee, upon entering into this Enquiry, have felt it their duty to state, in the first place; The Laws now in force respecting the care and maintenance of Criminal and Pauper Lunatics:

Secondly, The manner in which they are now ordinarily kept;

Thirdly; The provisions and regulations which it has appeared to the Committee that it might be expedient to adopt in future.

CRIMINAL LUNATICS.

THE only law relating to Criminal Lunatics, as distinguished from other insane persons, is the 40th Geo. III. c. 94. by which it is provided, That in all cases where it shall be given in evidence upon the trial of any person charged with Treason, Murder, or Felony, that such Person was insane at the time of the commission of such offence, and such person shall be acquitted, the Jury shall be required to find specially whether such person was insane at the time of the commission of such offence, and to declare whether such person was acquitted by them on account of such insanity; and if they shall find that such person was insane at the time of the committing such offence, the Court before whom such trial shall be had, shall order such person to be kept in strict custody, in such place, and in such manner, as to the Court shall seem fit, until His Majesty's pleasure shall be known; and it shall thereupon be lawful for His Majesty to give such order for the safe custody of such person, during his pleasure, in such place and in such manner, as to His Majesty shall seem fit: And in all cases where any person before the passing of this Act, has been acquitted of any such offences on the ground of insanity at the time of the commission thereof, and has been detained in custody as a dangerous person by order of the Court before whom such person has been tried, and still remains in custody, it shall be lawful for His Majesty to give the like order for the safe custody of such person, during His pleasure, as His Majesty is hereby enabled to give in the cases of persons who shall hereafter be acquitted on the ground of insanity.

This Statute does indeed empower His Majesty to give orders for the safe custody of persons so found to be insane, in such place and in such manner as to His Majesty shall seem fit; but as no provision is made for defraying the charge of their maintenance and cure, except where they

have sufficient property of their own, which could be applied to that purpose under 17th Geo. II. c. 5. s. 20. it has been in most instances impossible to remove them from the County Gaol.

In the course of six years, which have elapsed between the passing of the Act 40 Geo. III. c. 94. and the time of making the returns which have been referred to your Committee by order of the House, it appears that no less than 37 persons have been detained under the provisions of this Act, and are now confined in different Gaols, where, if Paupers, they are necessarily maintained at the County expence.

This number will of course annually increase, particularly if as at present no means are generally adopted for the cure of persons under such circumstances; and if the Parishes upon whom the burden of the maintenance of a Lunatic must otherwise fall, shall in consequence of his committing an offence be enabled to throw that expence during the remainder of his life upon the County at large, and thus profit by the omission of that care and precaution which it was their duty to have taken for his safe keeping.

The great inconveniences which must necessarily result from a continuance of the present system are fully detailed in the evidence of Sir George Paull, whom your Committee, on account of his humane and unwearied attention to every thing connected with this subject, thought it their duty to examine: And they fully concur in his opinion, that to confine such persons in a common Gaol, is equally destructive of all possibility of the recovery of the insane, and of the security and comfort of the other prisoners.

They have also to state a fact in confirmation of this opinion, communicated to them by one of their Members, which fell within his own knowledge: Aaron Bywater was acquitted a few years ago at the Great Sessions for the County of Montgomery, of a Murder committed by him, under the influence of Insanity, and was ordered to be detained in the County Gaol, where he still remains. In less than three weeks afterwards, he, though ordered to be strictly watched, was allowed during an apparently lucid interval to escape out of the Gaoler's sight, and murdered one of his fellow prisoners.

It therefore appears to be highly desirable that a Building should be erected for the separate confinement of all persons detained under the above-mentioned Act for offences committed during a state of Insanity; and that provisions should be enacted similar to those of the 17 Geo. II. c. 5. s. 20. directing the Magistrates of the County where the trial has been had, in all cases where it shall not appear to them that the Lunatic has sufficient property to defray the expences of his own maintenance, to enquire into the place of his last legal settlement, and to make an order upon such Parish, or if that cannot be ascertained, upon the County where he has been tried, to allow such weekly sum for his maintenance as shall from time to time be fixed by the Secretary of State for the Home Department, or such persons as His Majesty shall appoint to superintend such place of confinement. As one establishment of this nature will be sufficient for the whole kingdom, it may be expedient that it should be in or near the Metropolis, and that power should be given to the Secretary of State to make such regulations as may not only provide for the due care and management of the persons there confined, but may also ensure a full examination by competent judges into the state of mind of any person who may appear to be cured previous to his being allowed his discharge.

PAUPER LUNATICS.

THE earliest Statutes upon this subject, viz. the 17th Ed. II. Capp. 9 & 10. relate to Idiots and Lunatics in general; and are said by Lord Coke to have been declaratory of the Common Law.

They vest the custody of their lands and tenements expressly, and of their persons impliedly in the King; but the Royal Authority under these Acts having been exercised by the Chancellor, and not without a previous inquisition before a Jury to find the Idiocy or Lunacy of the Party, it is evident that the forms and expences requisite were not calculated for the case of Paupers; so that they are generally left to the protection of their friends and relations, or to the Overseers of the Poor.

The only Act which refers expressly to the case of Pauper Lunatics is the 17th of Geo. II. c. 5. (already referred to); by the 20th section of which it is enacted,

“ That it shall and may be lawful for any two or more Justices of the Peace where such Lunatic or mad Person shall be found, by warrant under their hands and seals, directed to the Constables, Churchwardens, and Overseers of the Poor of the parish, town, or place, or some of them, to cause such person to be apprehended and kept safely locked up in some secure place within the county or precinct where such parish, town, or place shall lie, as such Justices shall, under their hands and seals, direct and appoint, and (if such Justices find it necessary) to be there chained, if the last legal settlement of such person shall be in any parish, town or place within such county or precinct; and if such settlement shall not be there, then such person shall be sent to the place of his or her last legal settlement, by a pass, *mutatis mutandis*, as aforesaid, and shall be locked up or chained, by warrant of two Justices of the county or precinct to which the person is so sent in manner aforesaid; and the reasonable charges of removing, and of keeping, maintaining, and curing such person, during such restraint (which shall be for and during such time only as such lunacy or madness shall continue) shall be satisfied and paid (such charges being first proved upon oath) by order of two or more Justices of the Peace, directing the Churchwardens or Overseers, where any goods, chattels, lands, or tenements of such person shall be, to seize and sell so much of the goods and chattels, or receive so much of the annual rents of the lands and tenements, as is necessary to pay the same, and to account for what is so seized, sold, or received, to the next Quarter Sessions; but if such person hath not an estate to pay and satisfy the same, over and above what shall be sufficient to maintain his or her family, then such charges shall be satisfied and paid by the parish, town, or place, to which such person belongs, by order of two Justices directed to the Churchwardens or Overseers for that purpose.”—Under this statute several persons have been committed to Houses of Correction in different parts of the kingdom; and their condition there must be liable to all the same objections which apply to that of Criminal Lunatics in the Gaols, as above stated, except that their respective parishes are not in this instance relieved from the charge of their maintenance.

The number of other Pauper Lunatics in Poor Houses and Houses of Industry, according to the returns received, amounts to 1,765, exclusive of 483 in private custody; but these are so evidently deficient in several instances, that a very large addition must be made in any computation of the whole number.

From the county of Southampton no return whatever has been received. The counties of Hertford, Bedford, Cumberland, and Cambridge, do not return a single Lunatic; Essex returns only three, and Gloucestershire ten; while from Suffolk and Norfolk, where the returns have since been corrected by the enquiries of Dr. Halliday, whose detailed and particular accounts of those two counties have been laid before Your Committee, the numbers amount to one hundred and fourteen in the former, and one hundred and twelve in the latter. Many other instances might be pointed out of the inaccuracy of these returns, but Your Committee conceive these to be sufficient to justify them in recommending the measures hereinafter proposed for enforcing a complete return from each county.

Even if the condition of the persons so confined in Poor Houses were not so revolting to humanity, as from the evidence of Sir George Paul, and from the observation of different Members of Your Committee, it appears frequently to be; Your Committee are of opinion, that there are other sufficient inducements to provide proper places expressly for the reception of Lunatic Paupers. In their present situation there is no probability of their cure, and they remain a burden upon the public as long as they live. In the Asylum, which has for twenty years been established at York, nearly one half of the patients admitted have been discharged cured; and at St. Luke's a still larger proportion.

In many instances, but particularly in the Metropolis, parishes have adopted the system of boarding their Insane Paupers in private Mad-houses; and it gives satisfaction to Your Committee to report, from the evidence of Dr. Willis, that their treatment in general appears to be extremely proper; but it is right to observe, that this depends wholly upon the good conduct of the Keeper of such House, as, by the Act 14 Geo. III. c. 49. regulating Private Mad-houses, the Keepers are expressly discharged from reporting to the College of Physicians any Parish-Paupers whom they may take in; nor have the inspecting Commissioners considered themselves as required to examine into their situation.

The Measure which appears to Your Committee most adequate to ensure the proper care and management of these unfortunate persons, and the most likely to conduce to their perfect cure, is the erection of Asylums for their reception in different parts of the kingdom; a measure which has already been adopted with great success by private subscription at York, Liverpool, Manchester, Exeter, Hereford, Norwich, and Leicester. To this the public opinion appears to be so favourable, that it may be sufficient for the Legislature, at least in the first instance, rather to recommend and assist, than to enforce the execution of such a plan.

Your Committee therefore would propose, That power should be given to the Magistrates of any county, to charge the Expence of such building upon the County Rate; or, where circumstances will admit of it, for two or more counties to unite for this purpose, the charge upon their respective Rates being settled according to their population: That all Pauper Lunatics, within the district for which such Asylum shall be erected, shall be conveyed thither, and be there maintained at the expence of their respective parishes, at such rate as shall be fixed by a Committee of Governors, nominated by the Magistrates of the county or counties:

That annual returns of the number of Insane Persons chargeable to each parish, shall be made at the Michaelmas Quarter Session.

In fixing the number of counties which it is expedient should unite for this purpose, it appears from the evidence of those best acquainted with the subject, that it would be highly desirable, for the purpose of preventing unnecessary

necessary expence, that each building should be calculated to contain as large a number as possible, not exceeding three hundred.

The advantage of this, independent of the saving in the original cost of the buildings, is apparent from the Reports from the different Asylums now established. The weekly expence per head for each Lunatic at St. Luke's, where there are three hundred, does not exceed 7 s. 6 d.; while at York, where there are one hundred and fifty-eight, it is estimated at 9s.; at Manchester, where there are one hundred, at somewhat more; and at Leicester and Exeter, where the numbers are much smaller, it varies from 13s. to 15s. Attention should also be paid to placing the building in such a situation as from its vicinity may ensure the probability of the best medical assistance. For this reason, wherever an Asylum has already been established by private contribution, great benefit may result from connecting the proposed establishment with it; and in all cases it may be desirable to allow the addition of an establishment for persons of a superior class, to be defrayed by themselves; and for those who are in a state of distress, though not actually Parish Paupers, to be maintained by charitable subscription.

Your Committee think it proper to lay before the House, a Plan, which has been submitted to them, for the division of the kingdom into districts, for this purpose; the adoption of which, in each particular instance, must be governed by the local circumstances, of which the Magistrates of the respective counties will be the most adequate judges.

Your Committee have received much valuable information upon the form of building and establishment preferable for this purpose, which will be found in the Appendix, in the evidence of Messrs. Nash and Dunstan.

LIST of APPENDIX.

- N^o 1.—An Account of the Number of Lunatics and Infane Persons, confined and under Custody in the different Gaols, Houses of Correction, Poor Houses, and Houses of Industry, in England and Wales - - - - - p. 11
- N^o 2.—Copy of a Letter from Dr. Halliday to Mr. Williams Wynn; dated Halefworth, 26th March 1807 - - - - - p. 13
- N^o 3.—An Account of Pauper and Criminal Lunatics in the County of Norfolk *ibid.*
- N^o 4.—Copy of Suggestions on the Subject of Criminal and Pauper Lunatics, addressed by Sir George Onesiphorous Paul, bart. to Earl Spencer; dated Hill House, 11th October 1806 - - - - - p. 14
- N^o 5.—Minutes of Evidence:—viz.
- | | | | | |
|--------------------------------------|--------------------|---|---|-------|
| Sir George Onesiphorous Paul, bart.; | 6th March 1807 | - | - | p. 20 |
| Mr. Thomas Dunston; | 11th February 1807 | - | - | p. 21 |
| John Nash, Esq.; | 4th March 1807 | - | - | p. 24 |
| Dr. Willis; | 9th March 1807 | - | - | p. 25 |
- N^o 6.—A List from the Town Register, of the Names and Places of Abode of such as keep Houses for the Admission of Lunatics, and who took out Licences; October 1806 - - - - - *ibid.*
- N^o 7.—A List from the Country Register, of the Names and Places of Abode of such as keep Houses for the Admission of Lunatics, since the 1st January 1802 p. 26
- N^o 8.—Plan for the Division of the Kingdom into Districts, for the erection of Lunatic Asylums - - - - - p. 27

Appendix, (No. 1.)

AN ACCOUNT of the Number of LUNATICS and INSANE PERSONS, now confined and under Custody in the different GAOLS, HOUSES of CORRECTION, POOR HOUSES, and HOUSES of INDUSTRY in *England and Wales*; taken from Returns received from the several Counties; so far as the same can be made up.

COUNTIES.	Gaols.	Houses of Correction.	Poor Houses, Houses of Industry, or Workhouses.	TOTAL.	REMARKS.
Bedfordshire - - -	- -	- -	- -	- -	None.
Berkshire - - -	2	1	1	4	
Buckinghamshire - - -	- -	2	36	38	1 In a private Mad House.
Cambridge - - -	- -	- -	- -	- -	None.
Cheshire - - -	- -	- -	29	29	2 in private Confinement.
Cornwall - - -	- -	2	26	28	
Cumberland - - -	- -	- -	- -	- -	None.
Derbyshire - - -	1	1	55	57	3 in care of their Friends.
Devonshire - - -	2	- -	19	21	
Durham - - -	- -	1	44	45	{ 1 in a Lunatic Hospital. 20 not confined, in general maintained by the Parish. 22 not confined, maintain- ed by the Parish. 41 in private Custody.
Dorsetshire - - -	- -	- -	47	47	
Essex - - -	2	1	- -	3	
Gloucestershire - - -	2	- -	8	10	
Hereford - - -	- -	- -	- -	- -	6 in a private Mad House.
Hertford - - -	- -	- -	- -	- -	None.
Huntingdon - - -	- -	- -	4	4	3 in private Custody.
Kent - - -	- -	- -	62	62	
Lancashire - - -	5	- -	272	277	58 in private Custody.
Leicester - - -	1	- -	- -	1	
Lincoln - - -	1	- -	21	22	4 in private Confinement.
Middlesex - - -	5	27	143	175	110 in private Mad Houses.
Monmouth - - -	- -	- -	2	2	
Norfolk - - -	3	3	16	22	20 in private Mad Houses.
Northampton - - -	1	1	14	16	
Northumberland - - -	- -	7	23	30	
Nottingham - - -	- -	- -	35	35	
Oxford - - -	- -	- -	22	22	
Rutland - - -	- -	- -	19	19	
Carried over - -	25	46	898	969	291

N^o 1.—Lunatics and Insane Persons—continued.

COUNTIES.	Gaols.	Houses of Correction.	Poor Houses, Houses of Industry, or Workhouses.	TOTAL.	REMARKS.
Brought over - - -	25	46	898	969	291
Salop - - - - -	-	61	45	106	
Somerfet - - - -	3	-	64	67	{ 5 in private Custody, or at large.
Southampton - -	-	-	41	41	
Stafford - - - -	-	-	-	-	
Suffolk - - - - -	-	-	92	92	44 in private Mad Houses.
Surrey - - - - -	1	-	67	68	11 not confined.
Suffex - - - - -	2	2	77	81	2 in private Mad Houses.
Warwick - - - -	-	-	-	-	31 in private Mad Houses.
Westmorland - -	-	4	-	4	
Wiltshire - - - -	-	-	28	28	
Worcester - - - -	-	-	34	34	
Yorkshire, North Riding -	-	-	23	23	
- - D ^o - - West - D ^o -	-	-	424	424	{ 15 in York Asylum. 2 in Manchester D ^o . N. B. The Return does not discriminate between those in Poor Houses and those in private Custody.
- - D ^o - - East - D ^o -	-	-	3	3	
Anglesey - - - -	-	-	-	-	
Brecon - - - - -	1	-	-	1	25 not confined.
Cardiganshire - -	-	-	-	-	5 York Asylum.
Carmarthen - - -	-	-	-	-	None.
Carnarvon - - - -	1	-	-	1	None.
Denbigh - - - - -	-	-	-	-	None.
Flint - - - - -	-	-	-	-	None.
Glamorgan - - - -	-	-	-	-	None.
Merioneth - - - -	-	-	-	-	None.
Montgomery - - -	2	-	10	12	
Pembroke - - - -	2	-	-	2	
Radnor - - - - -	-	-	-	-	None.
TOTAL - - - - -	37	113	1,765	1,915	483.

Charles Watkin Williams Wynn.

Whitehall, 20th January 1807.

APPENDIX, (No. 2.)

Copy of a LETTER from Dr. Halliday to Mr. Williams Wynn.

Halefworth, 26th March 1807.

Sir,

I HAVE now been able to complete my enquiry for the county of *Suffolk*; and the number of Insane Persons amounts to one hundred and fourteen, of whom forty-seven are Lunatics, and sixty-seven Idiots. The Lunatics are confined to the cell allotted to their use in the different workhouses, except about thirteen, which are in the Lunatic Asylum at Norwich, and two that are in St. Luke's Hospital; the whole however are supported by the parishes. With regard to the Idiots, I may observe that the greater part of them are kept in the workhouses as common paupers, without receiving any more than common attention, and without being separated from the general mass. I understand too, that a practice prevails in some parishes of allowing the poor Idiot to remain with his mother or friends; and, when he is supported by the parish, this humanity, for I conceive it as such, is often perverted to the worst of purposes; idiotism is often counterfeited to secure the parish money. It was once very much the fashion in this county for poor farmers to pretend they had some secret remedy for madness, by which means they prevailed on the Guardians of the Poor, as well as others, to board such unhappy beings with them. The Farmer, no doubt found the allowance for two or three such patients a very easy way of making up his rent, and their labour, for (able or not able) they were compelled to labour, was amply sufficient to cultivate his farm. I have no doubt whatever but many, in this way, would be restored to reason and their friends, for nothing tends so much to divert the mind from itself or its imagined misery, as air and exercise, yet the treatment they met with was most inhuman, and I am happy to say, that I believe there are no such receptacles for Lunatics at present in Suffolk; I need not, however, deprecate this system, as the present mode of confining the Maniacs to a dark damp cell of the workhouse is much worse; but this cannot be remedied until Public Asylums are erected in every county, sufficient to contain the Maniacs as well as Idiots of that county. I have collected my information from the most respectable medical gentlemen in the county, and I have reason to think it tolerably accurate. I have not as yet received any satisfactory information from Norfolk, but shall have much pleasure in forwarding it to you as soon as I do.

I have the honour to be,

Sir,

Your most obedient Servant,

C. W. Wynn, Esquire,
&c. &c. &c.*Andrew Halliday.*

APPENDIX, (No. 3.)

An Account of PAUPER and CRIMINAL LUNATICS,
in the County of *Norfolk*.

THE total number of Pauper Lunatics in the county is one hundred and twelve, of whom twenty are in a Lunatic Asylum at Loddon, three confined in the common gaol, four in various houses of correction, twenty in various houses of industry, fifty-one in the Asylum at Norwich, and fourteen not confined at all. I may observe, that the Asylum at Loddon is kept by a surgeon; it contains a great number of Lunatics, most of whom pay very high for their board, &c. so that it is quite a private house, and the Paupers in it are supported by their respective parishes; they of course have some medical attendance. Those however confined in the houses of correction and in the common gaol have none; one of those now confined in the Castle of Norwich (the common gaol for the county) was suffered to go at large till he committed murder. The public Asylum at Norwich, the only one in the two counties of Norfolk and Suffolk for the reception of Pauper Lunatics, was established by a private individual, and can, when much crowded, receive seventy-four Lunatics; at present it contains

sixty-four, and fifty-one of these belong to the county; from fifteen to twenty of them are supported by the funds of the hospital; the remainder are maintained by their parishes, at an expence of from half-a-crown to seven shillings weekly each. Every further information, as far as it is possible, I shall always be ready to furnish,

And am, &c. &c.

Halesworth, 4th July 1807.

Andrew Halliday.

APPENDIX (No. 4.)

Copy of Suggestions on the Subject of CRIMINAL and PAUPER LUNATICS; addressed by Sir George Onesiphorous Paul, bart. to Earl Spencer, His Majesty's Principal Secretary of State for the Home Department;—dated Hill House, 11th October 1806.

My Lord,

ON the part of the Magistrates of the county of *Gloucester*, I apply to your Lordship in respect of *Charles Roberts*, who was tried on a charge of a capital felony, at the summer assizes 1800, and acquitted, with a special finding of the Jury that he was insane at the time of his committing the offence. Also of *James Need*, tried for an assault at the summer assizes 1803, and in like manner acquitted, under the powers of the Act 40 Geo. III. c. 94.; and both in consequence were remanded by the Court to the county gaol, there to be kept in strict custody until His Majesty's pleasure be known.

As your Lordship will observe, the former of these men has been kept six years, and the latter three, at the cost of the county, and to the relief of the prisoners own estate, and that of their friends, or of the particular parishes to which they respectively belong. His Majesty's pleasure has not yet been signified regarding them.

It seems, by the wording of this Act, that it was not intended that the directions of the Legislature should rest here, but rather that the remanding to strict custody, was a temporary expedient of an incomplete law, necessarily passed in the hurry of the momentous occasion which produced it, to be completed on a more deliberate consideration.

The county, on whose part I address your Lordship, wish to know what is intended to be the ultimate situation, not only of the individuals above-mentioned, but of this class of prisoners hereafter; who, if they are to remain in gaol for the term of their lives, or so long as the public may by possibility be endangered by their enlargement, will be a class accumulating by every succeeding circuit.

17 Geo. II.
c. 5, sec. 20.

I beg to observe to your Lordship, that this question is not put as disapproving the law so far as it has gone, but in the hope that a measure wisely adopted may be rendered complete to its ultimate object. But, supposing it determined that the common gaol of the county is the proper place for the continuance of confinement of these persons, there is a further important question for your Lordship's consideration, and that of the Legislature. Is the cost of the keeping, maintaining, clothing, and curing such Lunatics, to cease to be a charge on their own estates, or the parochial funds of their places of settlement, and be henceforth paid by the purse of the county, to the gaol of which such Lunatics shall happen to be committed?

By the general and long established law, 17 Geo. II. c. 5. s. 20. "where persons
"are by lunacy furiously mad, or so far disordered in their senses that they may be
"dangerous to be permitted to go abroad, two Justices of the Peace where such
"Lunatic or mad person shall be found, shall by warrant directed to the Constables,
"Churchwardens, and Overseers of the poor of the parish, cause such person to be
"apprehended, and kept safely locked up in some secure place within the county
"where the parish in which such Lunatic shall be found shall lie, as such Justices
"under their hands and seals shall appoint, if the last legal settlement of such
"Lunatic be in any parish within such county; and if such settlement shall not be
"there, then such Lunatic shall be sent by pass to the parish of his last legal settle-
"ment, and shall be confined in manner aforesaid, by warrant of two Justices, &c. &c."

"And the charges of removing, keeping, maintaining, and curing such person
"during such restraint, shall be paid from the goods and the annual rents of such
"person

“ person, if he hath sufficient goods and estate over and above what shall be sufficient to maintain his or her family, and if not, then such charges shall be satisfied and paid by the parish to which such person belongs; provided, nothing therein contained shall prevent any friends, &c. from taking such Lunatic under their own care and protection.”

From the tenor of these clauses it is evidently the interest of the parish officers, on behalf of their parishes, to prevent their Lunatics from committing acts of violence which may cause them to be brought within the notice of the Magistrates, who have the power of ordering them to be confined in any house of reception within the county, and the parish must be at the consequent expence of the maintenance, keeping, and cure.

Now presuming a case, that, through neglect of the parish officers, a lunatic shall be permitted to go abroad, and shall commit an act of violence, such as will bring him before a Court of Justice, he will be held in confinement under the Act of the 40 Geo. III. instead of being confined under that of 17 Geo. II. The parish, as the law now stands, would, by the very act of their own neglect, be relieved of the expence of maintaining and keeping the Lunatic, and the county in which he was accidentally apprehended (perhaps not the county of the parish of his settlement) will be charged with this expence, perhaps during a long life.

It is then not impossible, that when this consequence of neglect shall become understood, there may be found parish officers who may rather encourage than prevent an outrage which may bring a man to trial, and thus effect this important saving to the funds of his parish. An assault has produced this effect in Gloucestershire, to a saving of not less than £.25. per annum for several years.

As your Lordship has desired my detailed suggestions on this subject, I will give them as they arise in my mind at the instant.

Persons remanded to prison under this law, are of two descriptions, to be separately considered: First, persons who have been acquitted by juries on the impression of testimony, more or less false, given with a view to screen the offenders from a capital or other punishments: And, secondly, those acquitted, who really labour under an habitual insanity, in a greater or less degree.

As to the former of these descriptions, their situation does not merit our commiseration, nor is the keeping them in custody more inconvenient than the keeping of any other description of prisoners.

But when a man is really a lunatic, the mode of keeping, which in well regulated prisons is provided for the punishment of convicted felons, is unjust for any man acquitted on trial, and, regarding madmen, is wholly inconsistent with their situation, unless it were intended to heighten not repress the symptoms of their disorder.

Second. To keep any one or more madmen in the society of the Fines or untried felons, would be dangerous to his or their companions, and pregnant with disturbance.

Third. To shut up a Maniac in a cell, merely to put him out of the way, and to attain a security of his person with the least trouble, may aggravate the feelings of his mind, but never could remove the disease. Such a proceeding, however frequent in the practice of parish officers, will never be directed as His Majesty's pleasure, or by authority of law, nor indeed could it be tolerated under the eye of a Sheriff or the Visiting Magistrates of the county.

But to the particular cases, by way of instance. *Roberts* I conceive to be in point of the first description—namely, a person on whose trial the jury were decided by the impression of testimony, at least exaggerated with a view to screen the offender. The man has been uniformly quiet and well behaved in prison, and has not at any time shewn a tendency to lunacy. For such false pleas, and the attendant perjury, a certain consequent imprisonment under this statute is due punishment*. But it seems that, considered as punishment, though merited, it should have some fixed limits.

Six years imprisonment is four more than would probably have followed a conviction on the very perjury by which he was acquitted, and three more than, according to the practice of Judges, would have followed a conviction of his felony.

I certainly say that this man is not dangerous to be permitted to go abroad, perhaps he never was so from natural insanity; but as he has chosen, by his plea in a Court of Justice, to place himself in a situation of a man constitutionally dangerous, he and all persons so pleading should take the consequences, and indeed I believe these conse-

* I believe there is a very prominent case of this nature now in Newgate.

quences have nearly put an end to such pleas, as well as to the employment of those who made it their business to advise them.*

Suppose that sureties, in the nature of sureties of the peace, were required to a certain amount, to be named by Government according to circumstances; I believe this man has relations or friends of sufficient responsibility to answer the demand. Such sureties should be renewed from time to time, or the person surrendered to confinement.

The prisoner *Need* is of my second description; a man labouring under real insanity, whether of a kind symptomatic (and therefore curable) or of constitutional distemper (incurable) I know not. At present he is in a state not troublesome, and probably "not dangerous to be permitted to go abroad." This man will not easily find sureties; Is he therefore to remain in prison, whilst he who has friends shall be discharged?

But, my Lord, passing from particulars to general reasoning on this point:—regarding sureties, there are some difficulties and some objections to be encountered.

Sureties may not be a sufficient security against the disposition of a Maniac in all cases; for instance, in the case of an attempt on the person of the King; for, however the antient opinion "that a madman might be punished as a traitor for offering to kill the King" has been superseded by the milder spirit of our Courts, yet it would be too much to admit that the safety of the King's person might be put at the risk of a returning paroxysm.

Indeed regarding subjects, the antipathies and reigning conceits of a madman must be ever dangerous to the object of them, though the possibility of danger in their cases would, perhaps not justify a perpetual confinement.

But supposing a man in such a state as to be fit to be enlarged on sureties, but that he has no friends of a competent responsibility to be admitted to answer for him; what then? The care and cost of maintaining, restraining, and curing a Lunatic rests on the Officers of the Parish to which he belongs. They are in fact responsible for the public consequences of his actions. May he not be delivered over to such Parish Officers? And again, further, may it be ordained that any thing in the nature of a pledge or security shall be demanded of them in a corporate capacity?†

I risk no decided opinion on this point. I should perhaps hesitate to affirm the admissibility of enacting a demand of such sureties.‡

But if sureties may not be admitted, there remains of necessity a continuance of the imprisonment or of confinement in some other place, not a prison.

B. 1. Hawkins, l. 1.

At common law, Idiots and Lunatics are not punishable by any criminal prosecution whatsoever; but *Need*, for instance, in consequence of his re-commitment to prison, has been kept three years in the same ward, and in precisely the same state in which he would have been kept, probably, for one year only, in execution of his sentence on his conviction, had no special finding taken place.

A Lunatic is not punishable by any criminal prosecution whatever. But how is it to be proved, that the man is not in a state of punishment, who is placed in the same situation as those men are placed, who are in execution of sentence for felonies committed?

It seems a great stretch of legislative authority, to empower a Court of Justice, on the acquittal of a man who, in a fit of insanity, may have committed an assault, to imprison him in a common gaol for a time not limited; or, indeed, without a decision on his case as a Lunatic by the ordinary legal mode of enquiry, to submit him to any kind of constraint for life, deprived of the benefit of the Act of the 14 Geo. III. intended for the protection of persons in this unhappy situation, and to prevent their

* I am myself disposed to think further, that a degree of punishment following the acts of violence, even of a Lunatic, may tend to prevent such acts being committed by them. Experience, so far as we have gone on the new Act, seems to prove in support of this idea. Indeed, I know it to be the opinion of medical men conversant in this malady, that although Maniacs have not the power of combining ideas, or of drawing effects from causes by deduction, yet they possess a cunning and instinctive penetration, which makes them apprehend consequences from acts, and indeed to fear them; for they are universally cowardly. It is by keeping up this apprehension on their minds, that they are so easily governed in numbers by the modern system of treating them.

† We see in the 3d section of the Act of the 40th, the admission of the principle of taking bail for persons committed as dangerous to go abroad. Persons apprehended under circumstances which denote a derangement of mind, and a purpose of committing some crime, may not be bailed except by two Justices, &c.

‡ The practice of granting certificates from parish to parish, may be considered as in the nature of a pledge or surety against future consequences.

being longer deprived of liberty than they are divested of their reasoning faculties; and if it be said that this Act is not intended to mean confinement for life, then we come to the point of our inquiry: When and in what manner is it to be terminated?

Let it be also observed, that the detaining more than one Lunatic in any place not licensed for Lunatics, is a species of legal violation of the Act of the 14th, by the Act of the 40th of the King.

It will be said, that although Lunatics cannot by law be punished, yet by law it is directed that they shall be restrained.—Admitted;—but the restraint ordained is intended as an act of humanity to the object*, as well as of security to the public.

So attentive has been the law to their protection, that by one of our most antient statutes, the King is made the general guardian of Idiots and Lunatics; and Sir W. Blackstone observes on this statute, that, “if the King’s Chancellor, to whom he delegates his authority, should act improperly in granting custodies, complaint must be made to the King in Council.”

It seems then to follow, that if this Act is to be continued and followed up to its purpose; if Lunatics are to be so confined as not to excite the idea of a criminal punishment; places suited to their case must be constructed, and modes of restraint determined, and those places and those modes licensed or otherwise sanctioned by public authority, and open to an effective visitation and controul, such as has been inefficaciously imagined by the Act of the 14 Geo. III.

If proper places are to be provided and institutions established, we are then to consider, Shall these places be dependant on other Institutions (say gaols or hospitals) or shall they be sole and independent? For what extent or division of the Country shall they be provided? From what fund shall the cost be paid? national, provincial, or parochial? I think that wards for this purpose should be parts of extensive and independent Institutions, their primary construction should be at the expence of the Crown or the national fund; they should be instituted each for circuit, or other large division, and not for Counties; their general establishment should be supported by charge on the county rate of the several Counties united, in proportion to respective population; and the cost of maintenance, clothing, and special attendance, should be paid by the estate of the patient or his friends, or by the respective parishes, according to circumstances, as now provided by the powers of the 17 Geo. II.; and finally, in the case of a pauper not having a legal settlement, then by the county or parish in which he shall be found; this also according to the principle of existing law.

So far, my Lord, in compliance with your Lordship’s request, you have my detailed suggestions on the point in question, as it concerns the police and criminal justice of the country.

But to the Minister presiding over the general welfare of the interior, to a man that, without suspicion of flattery, I may call distinguished for his attention to the provincial duties, and therefore conversant in provincial evils, addressing myself to you, my Lord, I say I am under no apprehension that my remonstrances will be treated with what (from the habits of the last fifteen years) I am disposed to term a ministerial insensibility to interior regulations, if I take this opportunity further to advocate the cause of the most degraded, the most ill used class of objects, that fall under our attention as magistrates and as men.

I shall then further observe to your Lordship, that not only the parochial but other poor Lunatics, and by poor, I would be understood to mean Lunatics who, by their own estate, or that of their friends, are not able to pay eighteen shillings per week for cure and maintenance; these, I say, are frequently, even by their own relations, treated not only worse than other human beings, but worse than the brute race.

It is an observation of medical men of extensive practice, that the lunatic affection is a disease increasing in its influence in this country; in fact, I believe there is hardly a parish of any considerable extent, in which there may not be found some unfortunate human creature of this description, who, if his ill treatment has made him phrenetic, is chained in the cellar or garret of a workhouse, fastened to the leg of a table, tied to a post in an outhouse, or perhaps shut up in an uninhabited ruin†; or, if his lunacy be inoffensive, left to ramble half naked and half starved through the streets and highways, teased by the scoff and jest of all that is vulgar, ignorant, and unfeeling.

* They shall be kept, maintained, and cured. See 17 Geo. II. c. 5.

† I have witnessed instances of each of these modes of securing under 17 Geo. II.

I am concerned to say, that to the dungeons of the gaols some are devoted by the commitment of Magistrates, by a mistaken or heedless construction of the 17th Geo. II.

Of the number of these forlorn objects, I know that your Lordship has endeavoured to inform yourself; but I suspect that your laudable intention will be found to be frustrated, by design or negligence of Parochial Officers, who are ever jealous and apprehensive of the purpose of an unexplained enquiry.

It is, however, enough for my argument to say, generally, that of all the Lunatics in the kingdom, the one half are not under any kind of protection from ill treatment, or placed in a situation to be relieved from their malady.

Yet, if there be a disease which is a natural misfortune, unmixed with consequence of immoral life, this is that disease. The statute book is bare of legislative provisions for these persons. The first law respecting them is 17 Edw. II. c. 9 & 10. making the King guardian of the estate of Idiots and Lunatics, and particularly ordaining "that their lands and tenements shall in no wise be aliened or waisted, and that the King shall take nothing to his own use."

To this day this statute is the protection of Lunatics of property. No further notice is taken of them until the vagrant act of 17 Geo. II. c. 5. And there their situation is no otherwise treated than together with that of rogues and vagabonds, and in a way shewing that the security of the public was more in view than the care and relief of the objects.

It was not till the 14th of the present King, that legislative attention appears to be directed towards the treatment of the inferior classes of these people.

The general purport of this law regards the metropolis and seven miles round it. An incomplete branch, however, is allowed to extend a faint influence over provincial management.

14 Geo. III.
c. 49.

S. 22. "No house at a greater distance than seven miles from London, or within the county of Middlesex, shall be kept for the reception of more than one Lunatic, unless such house be licensed by the Justices of the Peace at their Quarter Sessions." "And two Justices and one Physician are to be appointed to visit every house so licensed, who, if necessary, may make minutes of the state of the house, care of the patients, &c. which minutes shall be entered in a register to be kept for that purpose by the Clerk of the Peace for the County wherein such house shall be licensed. And a copy of such register shall be sent from time to time to the Secretary of the Commissioners in London. And notice of the receipt of every Lunatic admitted into such house (except such Pauper Lunatics as shall happen to be sent there by Parish Officers) shall be given to the Secretary of the Commissioners in London, within fourteen days from the time of such Lunatic being received."

This law, imperfect and indeed absurd as it is regarding the counties, was designed for the protection and care of Lunatics in general, yet by not extending the visit of Magistrates to houses where a single Lunatic may be confined, it overlooks the situation in which the whole class of Pauper Lunatics are in fact placed, that is, of those whose own effects are not sufficient to pay, or whose friends or parishes will not pay, the cost of the keeping in the licensed houses.

It is about thirty years since a charitable Institution was first set on foot at York, having in view the relief and comfort of such Insane Persons as are in low and narrow circumstances. The liberal support given to this Institution, not only by gentlemen of the particular county, but of all the northern part of England, has marked the public sentiment on the subject. The building and fitting up only was paid for by the subscription. The relief which the indigent receive is through the increased payments of those in better circumstances, for whose accommodation suitable apartments are provided in the same house. The medical advice is given without cost to the public or the patients.

This principle has been adopted in many other places, but chiefly connected with hospitals, as at Manchester, and Liverpool. But in general these minor institutions have the misfortune to be too limited in their funds to receive patients at a sufficiently low price to embrace the cases of the poor. And this defect in funds individually arises from the sum total of the public energy being divided into the support of too many small establishments. There is an emulation between the medical staff of the several hospitals, which shall first open a ward for this class of patients. And an Institution of this kind can never receive patients at a cost within reach of the poorer classes, but where numbers are provided for in one building and by one establishment.

Now, my Lord, cannot we unite the police intention with the efforts of humanity and provincial economy, and by that union create a mutual support?

Suppose

Suppose Government to cause to be constructed, or at least to allow money for constructing, a proper ward or place of reception for Lunatics in each circuit or other large division, at points to be agreed on. Let the public be invited to unite with it in building, by subscription, a Lunatic Asylum for each division, suited to the different situations of patients of high and low degree; as at York. Indeed, I should propose to go a step further—by compulsory statute, I should direct provision to be made for parochial Lunatics by charge on the county rate of the several counties united. And at this point only excite the benevolence and generosity of the public for further purposes.

Once built, or at most built, furnished, and established,* no further cost need ensue. All patients should pay the average expence of maintenance, which would be from eight to eleven shillings per week.

The site of these buildings should be near a large town, the probable residence of a physician of eminence. There is little doubt even of a competition of men of science in the profession, for the management of such Institutions where respectably established, particularly if as in many copies of York (though not in the original) fees were allowed to be taken of superior patients.

For this proposed reform to be complete, a small alteration must be made in the Lunatic clause of the Vagrant Act, instead of the words mandatory on the overseers and other officers “to keep the Lunatic locked up in some secure place within the county,” it should stand “to secure such Lunatic in the Asylum of the district in which the parish of his settlement shall be situated.”

The Act of the 14 Geo. III. will admit, and indeed will require, very considerable amendment; and particularly instead of “no house shall be kept for the reception of more than one Lunatic, unless such house be licensed by the Justices, &c.” “that notice be given within fourteen days of the admission of any patient in the country to Commissioners in London;” “and that minutes of Justices visiting in the country be transmitted to the same Commissioners in London;” I should recommend to be enacted, that “no Lunatic or Lunatics should be confined in any house or place without notice thereof being given to the clerk of the peace within fourteen days after such confinement, and every house or place used for the confinement of one or more Lunatic or Lunatics, should be open to the inspection of Magistrates, whose minutes, on any inspection, should be returned to the clerk of the peace, to be laid before the court of Quarter Sessions of each county respectively, which court should have power to remedy abuses.”

There should of course be clauses of exemption, with regard to all places of confinement under the direction of the Lord Chancellor, the Royal Foundations, and perhaps other general hospitals (as St. Luke's); though with respect to the latter, I see no ill consequences that would follow inspection, to report whether or not the regulations of the hospital itself were adhered to; perhaps, also, there should be exemption where a son or daughter was confined by a parent.

Many years past a sight of the Institution at York, under the excellent management of Dr. Hunter, directed my attention to this subject, and I planned a similar institution for this and the neighbouring counties. A large sum is already subscribed and still accumulating for executing the work; but so far from interfering with any general public design for the circuit†, I venture to say, on the contrary, that the subscribers would readily consent to promote such purpose, if recommended by Government.

In London, any one of the present existing hospitals would doubtless be ready to attach a government ward to its establishment, on receiving the cost.

In the district of York also, it may be presumed, that no more need be done than to remit the estimated expence of such an addition, which I should presume would not be more than from two to five thousand pounds, according to extent and population.

I conceive that in any Institution, supported by popular opinion, the Criminal Lunatics must be provided for as a distinct class, for although these persons are in law not answerable for their offences, yet decent families would have their prejudices, and might disapprove of their friends being classed with persons who had been tried for felonious acts.

* By establishment as distinct expence, I mean the wages and maintenance of the officers and servants, which must be a fixed and permanent charge.

† To put the inhabitants of the distant parts of a district on a footing with those who might be more near, let the cost of conveying parochial poor be paid from the district fund; and as to the superior classes, the distance, so far as 50 or 60 miles, will be rather a recommendation than objection.

It is necessary, I should observe, my Lord, that the contents of this Address are merely suggestions which have arisen in my mind *currente calamo*. It is not worth the while to attempt to digest into form for practice, until we know what may be approved as principles by His Majesty's Ministers.

I have the honour to remain,

Your Lordship's faithful servant,

(Signed)

G. O. Paul.

Hill House,
October 11th, 1806.

APPENDIX (No. 5.)

MINUTES OF EVIDENCE.

Veneris, 6^o die Martii, 1807.

Sir GEORGE ONESIPHOROUS PAUL, Bart. called in, and examined.

Sir G. O. Paul,
Bart.

HAVE you made any observations on the state of the gaols?—Constantly, during the last twenty-five years.

Have you observed many Lunatics in confinement?—Not until since the Act of the 40th of His present Majesty, c. 94.

What has been the state of them?—To speak specifically of two confined in the gaol of the county of Gloucester, the one *Thomas Roberts*, who was tried and acquitted on account of lunacy, soon after passing that Act; he was tried for a highway robbery, and I have reason to believe he was acquitted on a false plea of lunacy, inasmuch as he has been cook to the penitentiary house six years, and conducted himself as a man of sound mind. Also *James Need*, tried for an assault at the summer Assizes 1803, and remanded under the powers of the same Act, to be kept in custody till His Majesty's pleasure shall be further known; and during that time he has been maintained at the charge of the county, to the relief of the parish in which he is settled; this man is really insane, and probably dangerous to be permitted to go abroad.

How far do you conceive the best regulated gaols to be proper places for the custody and cure of Insane Persons?—I think gaols, however well regulated, are places highly improper for the custody, and inconsistent with the cure of Lunatics. It is improper as a place of custody, because they must of necessity either be kept in society with other persons disposed to torment them and aggravate their misfortunes, or they must be shut up in total solitude, in a situation completely inconsistent with any regard to their cure. I conceive, also, that to confine a madman together with criminals, would be dangerous to those with whom he was confined, and pregnant with disturbance; as the present system of constructing gaols is calculated for the conveyance of sound.

Have you known any inconvenience arise from the noise and disturbance created by the confinement of Lunatics within a gaol?—I have an instance at present in the case of a debtor, who has been confined five years in the gaol of Gloucester for a debt so large as not to come under the intended benefit of the insolvent act, and who in his paroxysms is frequently heard in the streets at Gloucester, and of course disturbs, not only the persons within the prison, but also the inhabitants of the neighbourhood to a considerable distance, and has frequently excited, in the minds of the populace, an idea that some cruelty was exercising within the walls of the prison. I have also known an instance in the same gaol, of a person brought in for debt, in a paroxysm of lunacy, and delivered to the Sheriff in that state, and who, although attended by the two physicians visiting that gaol, and although he had every other possible assistance, died in the paroxysm in two days. I have also reason to believe, that there are many similar instances in other gaols, and I am also of opinion, that those instances will be most multiplied where they are best taken care of at the county expence.

Do you apprehend the necessary attendance upon a Lunatic could be supplied at as cheap a rate in a gaol, as at a house set apart for the reception of Lunatics?—Every
Lunatic

Lunatic in a gaol either has or ought to have one or more persons whose especial business it is to look after him. As in well regulated prisons no more officers are kept than necessary for the ordinary business of the prison; in the case of the debtor above stated, two fellow-prisoners are constantly paid each of them to the amount of the county allowance out of a fund appropriated to charity in that prison.

Sir G. O. Paul,
Bart.

Have you observed the manner in which pauper Lunatics are usually kept by the Parish?—I have in many instances seen Lunatics in parish poor houses, but in no instance have I seen them kept with any regard to their cure; they are generally confined in some out-house or cell, or other place in which their noise gives least disturbance and trouble to the keepers of those houses. I have seen poor Lunatics not in the poor house, who have been fastened to the leg of a table within a dwelling house; others chained to a post in an out-house; and in one instance I witnessed the case of a man shut up chained in an uninhabited ruin, and food daily brought to him from his relations, living at a quarter of a mile distance.

Have you made any calculation respecting the costs of providing for the maintenance and care of Lunatics in a house properly established for their reception?—I did so in the year 1795, when I made my calculations on various numbers, from 20 to 67 patients; it being evident that the individual cost of each patient will diminish in proportion as numbers increase to a certain extent; that the most economical establishment would be from 250 to 300. By my calculation in 1795, when there were 20 patients, I conceive the average cost would be 12s. 4d. per week, where there are 24 patients 11s. and 1½d.

	s.	d.		s.	d.
25 patients - - - -	10	10½	42 patients - - - -	9	—½
26 D° - - - -	10	7½	48 D° - - - -	8	6½
27 D° - - - -	10	5	67 D° - - - -	7	6½
30 D° - - - -	9	10½			

and I have reason to believe, that the 7s. 6½d. in 1795 would now be 9s. 6d. and the other sums proportionably increased. But I beg leave to refer the Committee for further particulars on this subject to my scheme of an Institution, and description of a plan for a Lunatic Asylum, to be built at Gloucester, drawn up and published by me in the year 1796. In the above calculation I include board, medicine, attendance, and household establishment, but not the prime cost of the building or the clothing of the patient.

Withdrew.

Mercurii, 11^o die Februarii, 1807.

Mr. THOMAS DUNSTON, Master to St. Luke's Hospital.

GIVE an Account of the establishment of St. Luke's Hospital?—The officers and servants to St. Luke's Hospital are as follows; viz. a physician, surgeon, and secretary, non-resident; an apothecary and his wife, a master and matron, six men and ten women servants, resident.

Mr. T. Dunston,

The average number of patients at one time in the hospital is three hundred; there are consequently 320 persons to provide for.

The convalescent patients assist in performing the household work.

The average number of incurable patients in the house at one time is 115, and there are waiting for admission 640 persons.

The average number of curable patients admitted annually is as follows:

Males 110. Females 153—Total 263.

of which number 60 are parish patients.

The numbers discharged are as follows:

Cured, Males 37. Females 71.—Total 108.

Uncured, Males and Females 100.

Unfit from various causes, chiefly palsy, fits, pregnancy, &c. 28. Dead 27.

From the above estimate it appears, the proportion of females to males admitted is nearly as 3 to 2; of females cured to males, nearly as 2 to 1.

Mr. T. Dunston.

	£.	s.	d.
The average of salaries to the officers is - - -	467	—	—
- - D ^o - - wages to servants - - -	303	19	2
- - D ^o - - medicines - - -	79	15	3
- - D ^o - - house expences, viz. bread, meat, butter, cheese, bedding, ironmongery, &c. &c. - - -	5,146	4	—
The average of ground rent and taxes is - - -	270	13	8
	£.	6,267	12 1

The building cost £. 55,000, which taken at an interest of 6 per cent, is - - -	3,300	—	—
The average of repairs is - - -	297	10	8
	£.	9,865	2 9

	£.	s.	d.
The average expenditure for each person exclusive of the building and repairs, is - - -	19.	9.	9.
- - D ^o - - inclusive of D ^o - - D ^o - - -	30.	16.	6.
- - D ^o - - for each person's board, bedding, and washing, &c. - - -	16.	1.	9.

What space of ground does the building occupy?—The ground, including yards and gardens, three acres and an half, which we find fully sufficient.

How long have you been master of St. Luke's?—Upwards of 25 years?

In what capacity was you in Bedlam?—Keeper. I was Keeper there between seven or eight years; and I have only to observe further on the subject of the building, that for the description of persons intended to occupy it, I think the rooms used only as sleeping rooms, which are 10 ft. 6 in. by 8 ft. would do equally well if they were only 8 ft. by 7 ft. The width of the galleries at St. Luke's, in which the patients walk in wet weather, is 15 ft. 6 in. whereas a width of 12 ft. would be sufficient.

Is St. Luke's, at any time wholly occupied with Lunatics?—Always.

What number will completely occupy it?—Three hundred.

What space of ground does the building itself occupy?—The building is 493 ft. long, and 30 ft. deep in the centre, the wings project from front and rear 60 ft. each.

What space do the yards and gardens occupy?—There are two airing grounds for the use of the patients, containing about 2,000 superficial yards each; the front area is the length of the building, and 30 ft. wide, there is a kitchen garden and detached pieces, making in the whole about $3\frac{1}{2}$ acres.

What is the number of apartments in St. Luke's?—The body of the house consists, on the ground floor, of the master's office and closet, the apothecary's office and shop, a dining and visiting rooms; on the one pair, of a committee, physician's, and a waiting room; on the two pair, of a master's, matron's, and apothecary's chambers, and a work room; on the three pair, of five bed rooms. There are seven galleries, each of which contains 32 single rooms, 10 ft. 6 in. by 8 ft. two rooms, four beds in each, 18 ft. 4 in. by 9 ft. 9 in. a fitting room 28 ft. by 13 ft. a smaller fitting room for refractory patients 10 ft. 6 in. by 8 ft. and a servant's room about 17 ft. square. There are two attics in the building, containing five rooms each, in which the other patients are lodged; there are also two privies, a wash room, and three straw shafts.

N. B. The fitting room would be better was it wider, and the smaller fitting room should be larger, one privy, and one straw shaft would be sufficient.

How many kitchens; if but one of what size?—A kitchen 28 ft. by 18 ft. 6 in. and scullery adjoining 21 ft. by 9 ft. a smaller kitchen 18 ft. by 15 ft. in which the servants dine.

How many wash-houses; if but one of what size?—One wash-house 56 ft. by 12 ft. one for foul blankets, &c. 27 ft by 12 ft.

N. B. It would be an advantage if the large wash-house was wider.

How

How many laundries; if but one of what size?—A drying room 15ft. square, heated by a stove, and a mangling and ironing room 26ft. by 11ft.

Mr. T. Dunston.

N. B. This is hardly wide enough; beside the kitchens, &c. above stated, there are on the ground floor baths, a laboratory, coal cellars, and water engine.

Whether the present building is, in your opinion, sufficiently commodious for the number and description of Lunatics now specified by you to have generally occupied it?—Yes; with the exceptions above stated.

Whether the same sized building, which has commodiously supplied all the wants and comforts of that number and class of patients now described by you, would have had within itself sufficient accommodation, provided thirty-five of the specified number of Lunatics had been paralytic, and a like number of thirty-five had been in a state of bodily weakness?—No; but I am of opinion there will never be more than half that proportion paralytic or out of health.

Do not 100 Lunatics of a weak and infirm and a paralytic description, require more room, more care, more attendants, and more expence, than the same number not affected with bodily diseases?—Yes; a number of 100 would require two additional nurses.

What additional number of attendants would be required if a fifth of these 300 were paralytic, and otherwise weak and infirm?—One man and one woman.

What additional expence in wine, spirits, medicine, and nourishing diet, would ten paralytic and weak Lunatics require, over and above the same number of ten of that description kept in St. Luke's?—From two to three shillings per week each.

What food are the Lunatics generally supplied with in St. Luke's?—Breakfast,—water gruel with bread, butter, and salt. Dinner,—on Sundays, Tuesdays, Thursdays, and Fridays, mutton, beef, veal, and sometimes pork, with the best table beer; on Mondays, Wednesdays, and Saturdays, broth. Supper,—Bread and cheese, or bread and butter, with beer; a larger allowance on broth days.

Whether for the most part the Lunatics in St. Luke's, are not provided with the same food in compliance with a general system, (deviating no doubt at times in some peculiar cases?—Yes; the deviations are in cases of illness, when beef-tea, broth, sago, wine, &c. are given.

What is the greatest number of Lunatics allowed to occupy one sitting room?—About thirty.

What size is the room the greatest number occupy?—28ft. by 13ft.

What is the greatest number of Lunatics allowed to sleep in any one room?—Four in a state of recovery.

What is the size of the room in which the greatest number sleep?—18ft. 4in. by 9ft.

What size are the beds? what the cost? are the bedsteads iron?—The bedsteads are of wood, 6ft. by 3ft. moveable ones, cost £.2. 18s. fixed with leaded drawers, &c. £.3. 3s.

In general, after Lunatics have been under an uniform management at St. Luke's, is it necessary that one in ten, should be under direct coercion?—It is not easy to average the number of patients in ten that require a continuance of coercion, I think they may be about three in twenty; they are patients disposed to injure themselves or others, and are seldom or ever to be trusted with confidence, much is certainly to be done by management, but it is impossible, on this head, to lay down a general rule, each effort must be adapted to the peculiar indisposition, it is necessary to check some, to encourage others, and to animate all with a hope of recovery.

Do not a great proportion of Lunatics, by a firm and uniform management, and by habit become tractable; which Lunatics, if allowed to separate and follow their own wills, would soon be unmanageable without coercion?—Yes, a large proportion.

Are there any Idiots in St. Luke's, or such like?—They are not allowed by the rules of the Hospital.

How many floors are there for the reception of patients at St. Luke's?—There are four, including the basement.

Mr. T. Dunston.

Do you find any inconvenience arise from the number of floors?—None.

Does it appear to you necessary, that in a Lunatic ward, the bed rooms for the patients should be placed on one side only of the galleries?—In St. Luke's they are double at each end, for the space of near 30ft.

What is the whole length of one gallery?—About 120ft.

Have you found any advantage from the cold baths, for the use of Lunatic patients?—Yes; by washing and keeping them clean in warm weather.

Withdrew.

Mercurii, 4^o die Martii, 1807.

JOHN NASH, Esq. called in and examined.

I HAVE turned my thoughts to the construction of a Lunatic Asylum.

Mr. Nash.

For what Asylum did you furnish plans?—For an Asylum by subscription for the county of Hereford, for an Asylum at Exeter, and for an Asylum at Gloucester not yet executed.

Can you inform the Committee of the comparative expence in building Asylums for different numbers of patients?—I can.

What would be the expence in building an Asylum, according to Sir G. Paul's plan, for 50 patients in London?—Upon the supposition that the building is to be erected of brick; that the walls are to be two bricks in thickness; the dining-room 21 feet by 12; the wards 12 feet by 10 feet, and 10 feet in height; that the Overseer's room is to be 14 by 12; that the floors and ceilings, and walls, and partitions are to be lined with elm boards; that the floors and partitions are to be filled in with sawdust, to prevent the communication of sound; that the buildings are to be covered with slate, with dripping eaves; two water-closets to be erected in each division of ward,—the cost will be as under:

For the wards and gallery	£. 7,000
For the eating room, Overseer's room, water-closets, stairs to yard, cisterns and water-closets appertaining to those wards, exclusive of general offices	760
	7,760

Supposing the general offices to consist of the offices described by Sir G. Paul, in his scheme for the Gloucester Asylum, kitchen, scullery, two larders, a pantry, a laundry and washhouse, and servants' eating room, and cellars on the basement floor; a surgeon or apothecary's room, a room for his medicines, a room for his books and papers, which is also to serve as a committee room; a hall of inspection, with staircase and gallery of inspection for the upper wards; a housekeeper's room; a store room; a bread room; hot and cold bath; a waiting room; and a passage of entrance, to be built of the like materials of the wards; will cost, together with the bed rooms for the domestic officers, £. 3,100.

What will be the expence of adding a third ward, to contain 25?—On the foregoing data, £. 3,880.

Withdrew.

Lunæ, 9^o die Martii, 1807.

Dr. WILLIS called in, and examined.

How long have you been a Commissioner under the Act of Parliament of 14 Geo. III.?—About a year and an half.

Dr. Willis.

During that time have you had frequent opportunities of observing the manner in which the Pauper Lunatics are taken care of in the different private mad-houses within the district of London and Middlesex?—I have repeatedly visited the houses within that

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Dr. Willis.

that district during that time, but in general I have reason to think, that the inspection of the Commissioners has been productive of considerable improvement.

Has it in general met with your approbation, or have you observed any want of due care and management?—In general it has met with my approbation, in some instances I have observed the want of attention to cleanliness, and, in general, want of accommodations.

Are they in general allowed a sufficient space?—I think in general they are.

What degree of medical attendance do you think necessary in a house for the reception of Lunatics?—In my opinion, a house should have the daily attendance of a medical person.

Do patients of any particular description require any peculiar accommodation, with respect to their apartments, or to their food, or otherwise?—Certainly; including the paralytic, the infirm, and the violent, require each a separate plan of treatment; the infirm will require a more nourishing sort of food, and warmer apartments, and separation from the rest of the patients.

Are you of opinion that warm and cold baths are necessary for lunatic patients?—I think warm baths may be very useful; but it can seldom happen that a cold bath will be required.

Are you of opinion, that in such a house, it is necessary the convalescent should be separated from the other patients?—I do not think in general that such a separation is called for, not having found from experience any disadvantage arise from the want of it.

Do you consider it to be at all disadvantageous that a Lunatic should be removed to a distance from his friends?—I do not conceive it to be disadvantageous in general, in some instances even advantageous.

Withdrew.

APPENDIX (No. 6.)

A List from the TOWN REGISTER of the Names and Places of Abode of such as keep Houses for the Admission of Lunatics, and who took out Licences, October 1806.

NAMES.	PLACE of ABODE.
Thomas Warburton, - - -	Hackney.
Esther Burrow, - - -	Hoxton.
Jonas Hall, - - -	Fulham.
Mary Glanville, - - -	Kingsland.
Ann Holmes, - - -	Islington.
Jane Jones, - - -	King's Road, Chelsea.
Stephen Casey, - - -	Plaistow, Essex.
William Moyfes, - - -	Stockwell, Surrey.
Dr. Monro, - - -	Adelphi Terrace.
Joseph Agar, - - -	Hoxton.
Thomas Pierce, - - -	Beaufort Row, Chelsea.
Jonathan Miles, - - -	Hoxton.
James L'Homme, - - -	Hackney Road.
James Sykes and William Giles,	Little Chelsea.
Peter Gilles Briand, - - -	Kensington Gore.
Elizabeth Mullinger, - - -	Austin Friars.
John Pile, - - -	Somers Town.

APPENDIX (No. 7.)

A LIST from the COUNTRY REGISTER of the Names and Places of Abode of such as keep Houses for the Admission of Lunatics, since the 1st of January 1802.

NAMES.	PLACES of ABODE.
Thomas Arnold, - - - -	Leicester.
Richard Browne, - - - -	Egham, Surry.
Mr. A. Chew, - - - -	Billington, Lancashire.
John Cox, - - - -	Fishponds, Gloucestershire.
William Crook, - - - -	Laycock, Wilts.
Mr. Edwards, - - - -	Blakely Asylum, Manchester.
Mr. Finch, - - - -	Laverstock, Wilts.
Edward Long Fox, - - - -	Clewer Hill, Gloucestershire.
Joanna Harris, - - - -	Hoaknorton, Oxfordshire.
Zachariah Jefferys, - - - -	Kingsdown, Wilts.
Robert Stracey Irish, - - - -	Frimley, Surrey.
James Johnson, - - - -	Shrewsbury.
Justinian Mercer, - - - -	Halstock, Dorsetshire.
Samuel Newington, - - - -	Ticehurst, Suffex.
Samuel Prond, - - - -	Bilston, Staffordshire.
William Perfect, - - - -	West Malling, Kent.
Stephen Pellett, - - - -	St. Alban's, Herts.
Edward Rigby, - - - -	Lakenham, Norfolk.
William Ricketts, - - - -	Droitwich, Worcestershire.
Dr. Steavenfon, - - - -	Newcastle-upon-Tyne.
James Stilwell, - - - -	Stoke, near Guildford, Surrey.
Dr. Willis, - - - -	Gretford, Lincolnshire.
John Goward, - - - -	Framlingham, Norfolk.
Dr. Fawcett, - - - -	Low Toynnton, near Harmartle, Lincolnshire.
Mr. Jacob, - - - -	Hadham, Herts.
Mr. Jollye, - - - -	Loddon, Norfolk.
Mrs. Anne Cocks, - - - -	Hertford.
Mr. Gibbs, - - - -	Henley in Arden, Warwickshire.

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APPENDIX (No. 8.)

PLAN for the Division of the Kingdom into Districts, for the Erection of
Lunatic Asylums.

COUNTIES.					Population.	Population of each District.	Places of Asylum.
1.	{	Northumberland -	-	-	157,101	476,309	DURHAM.
		Cumberland -	-	-	117,230		
		Westmorland -	-	-	41,617		
		Durham -	-	-	160,361		
2.		Lancashire -	-	-	-	672,731	LIVERPOOL.
3.		Yorkshire -	-	-	-	858,892	YORK.
4.	{	Cheshire -	-	-	191,751	444,536	CHESTER.
		North Wales -	-	-	252,785		
5.	{	Derbyshire -	-	-	161,142	510,049	NOTTINGHAM.
		Nottinghamshire -	-	-	140,350		
		Lincolnshire -	-	-	208,557		
6.	{	South Wales -	-	-	288,761	523,534	HEREFORD.
		Hereford -	-	-	189,191		
		Monmouth -	-	-	45,582		
7.	{	Salop -	-	-	167,239	545,725	SHREWSBURY.
		Stafford -	-	-	239,153		
		Worcester -	-	-	139,333		
8.	{	Leicester -	-	-	130,081	486,384	LEICESTER.
		Rutland -	-	-	16,356		
		Warwick -	-	-	208,190		
		Northampton -	-	-	131,757		
9.	{	Cambridge -	-	-	89,346	443,928	CAMBRIDGE.
		Huntingdon -	-	-	37,568		
		Hertford -	-	-	97,577		
		Essex -	-	-	226,437		
10.	{	Norfolk -	-	-	273,371	483,802	NORWICH.
		Suffolk -	-	-	210,431		
11.	{	Somerset -	-	-	273,750	524,559	BATH.
		Gloucester -	-	-	250,809		
12.	{	Oxford -	-	-	109,620	389,672	OXFORD.
		Berks -	-	-	109,215		
		Bucks -	-	-	107,444		
		Bedford -	-	-	63,393		
13.	{	Middlesex -	-	-	-	-	LONDON.
		London, Westminster, & Southwark -	-	-	-		
		Surrey -	-	-	-		
14.	{	Cornwall -	-	-	191,751	534,752	EXETER.
		Devon -	-	-	343,001		
15.	{	Dorset -	-	-	115,310	520,082	SALISBURY.
		Wilts -	-	-	185,107		
		Hants -	-	-	219,656		
16.	{	Suffex -	-	-	150,311	457,935	CANTERBURY.
		Kent -	-	-	307,624		

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1816.

FIRST REPORT:

MINUTES OF EVIDENCE

Taken before The SELECT COMMITTEE appointed to
consider of Provision being made for the better
Regulation of MADHOUSES, in *England*.

Ordered, by The House of Commons, to be Printed,
26 April 1816.

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Mr. Matthew Talbot, Manager of the White House at Bethnal Green, for Mr. Warburton	- - - - -	pp. 14. 21.
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Mr. John Blackburne, Keeper at Bethlem	- - - - -	pp. 56. 90.
Mr. James Birch Sharpe, Surgeon, residing at Hoxton	- - -	pp. 59. 74.
Dr. James Veitch, M. D.	- - - - -	pp. 65. 79.
Mr. John Watts, Superintendant at Hoxton	- - - - -	pp. 69. 89.
Dr. Richard Powell, Secretary to the Commissioners for regulating Madhouses	- - - - - }	pp. 75. 78.
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Mrs. Mary Humieres, formerly Housekeeper in the House of Mr. Talbot, at Bethnal Green	- - - - -	pp. 80. 83.
Dr. Andrew Baird, M. D. Inspector of Naval Hospitals, &c.	- - - -	p. 89.
Sir John Newport, Baronet, a Member	- - - - -	p. 93.

The principal object of this report is to state the result of the inquiry made by the Commissioners into the state of the madhouses in England, and to show the necessity of a new Act of Parliament to regulate them. A list of the names of the madhouses, and of the persons who were committed to them, is given in the Appendix. The names of the persons who were committed to the madhouses, and of the persons who were committed to the madhouses, are given in the Appendix. The names of the persons who were committed to the madhouses, and of the persons who were committed to the madhouses, are given in the Appendix.

FIRST REPORT.

MINUTES OF EVIDENCE

Taken before the SELECT COMMITTEE appointed to consider of Provisions being made for the better Regulation of MADHOUSES, in *England*.

Jovis, 22^o die Februarii, 1816.

Lord ROBERT SEYMOUR in the Chair.

Mr. *John W. Rogers*, called in, and Examined.

WHAT is your profession?—I am an Apothecary, residing at No. 30, Broad-street Place, in the City.

Mr.
John W. Rogers.

What do you know, personally, of the licenced madhouses within the bills of mortality, or elsewhere?—From my having been constantly in the habit of visiting them for some years past, twelve or thirteen years, I have witnessed many of those cruelties which are constantly practised in them.

As what did you visit them?—Professionally, as an apothecary and accoucheur.

How, employed by the master of the house, or by the patients themselves?—I was assistant to Mr. John Dunston of Broad-street, but I had the management of those houses under my own care. Mr. Dunston seldom visited them; he was an apothecary, and I was his visiting assistant; he used to see them occasionally.

Which are the houses you so visited?—Talbot's, the White House at Bethnal-Green, Rhodes's at Bethnal Green, and Whitmore House, but not so frequently.

The former frequently?—Yes; every other day, or every day, or two or three times a day. I have been there at labours all night.

Are those the only houses you visited, so as to speak to the practice of them?—Yes, they are; I have been in Saint Luke's, and other houses, but only occasionally.

Whose houses are the Bethnal Green houses?—Mr. Warburton's.

Both of them?—Yes.

All the three houses at Bethnal-Green are Mr. Warburton's?—Yes they are, and he had one at Hackney.

Who is Mr. John Dunston?—He is the son of the steward of Saint Luke's Hospital.

Was he regular surgeon at those three houses you have mentioned?—Yes; he is the one that is most favoured, because he is a relation of Mr. Warburton; he is his son-in-law, consequently they put every thing in Mr. Dunston's way, greatly, I think, to the exclusion of other practitioners; his principal business arises from this kind of practice.

The principal business of those three houses is done by Mr. Dunston and his deputy?—Yes; every thing is thrown in his way that can be.

Do you know, of your own knowledge, that he has a salary for so doing, or is he paid for his visits?—We send medicine, and the bills are sent in half-yearly in general; but he is so far favoured, that they are paid by the house, whether the patient pays the master or not; that is a favour from his father-in-law.

You had a sister in one of those houses?—I had.

What situation did she hold there?—She was housekeeper at the White House.

How long was she there?—I believe three years, or nearly.

Where is she now?—She is in France, with her family.

Do you recollect seeing at the White House a keeper of the name of Samuel Ramsbotham, beating in a most shocking manner Captain Dickinson, of the

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Royal Navy, who was confined by means of a chain on his legs, and handcuffs, which rendered it out of his power to ward off the blows, which were repeatedly given him on the face and body?—Yes; I witnessed it myself, in company with Mr. John Dunston and Mr. Talbot; we were looking through the paling of the yard on hearing him call out, and saw it.

Did not Captain Dickinson die shortly after receiving those blows?—He did die shortly after; I do not mean to say that he died from those blows; I cannot at all speak to the cause of his death, in my own mind; these abuses accelerated it.

Did you remonstrate at all with Mr. Talbot, as to the conduct of the keeper, who you say ill-treated Captain Dickinson?—Mr. Dunston did, in my presence.

What was his answer?—He shook his head and said, he was a cruel sort of man, and that he must get rid of him.

Do you know how long after that observation of the necessity of getting rid of him, he remained in the house?—He remained a year and a half, or two years.

How long has he quitted the house?—I did hear a few weeks since, that he was discharged for some other act of cruelty.

How long ago is the treatment you have spoken of?—That was in the year 1811, I think.

Do you know any other instances of cruelty practised by the same keeper?—Yes; I was told by my sister, who was then housekeeper, that she one day heard a violent screaming on the gentlemen's side of the house; she immediately ran towards it, and found Samuel Ramsbotham beating in the most violent manner, with a large thick pair of boots, a Mr. Driver, a respectable farmer.

Was he manacled?—No, he was not; this man died a little while after from a violent attack of inflammation, extending from the foot to the hip, as I was informed.

Has your sister given you information, or do you know of your own knowledge, of other instances of cruelty practised by the same keeper?—Yes; I was requested to look into the mouth of a patient, a gentleman, who had been placed there two or three days, saying, that he had been very much injured by Samuel Ramsbotham; on inspecting it, I found a wound in the palate through which some body had been forced, and which I heard he had done with the handle of a wooden spoon, in endeavouring to open his mouth.

Did the patient refuse to eat?—Yes; but he was very clear in telling me what had happened; he did not chuse to eat just then; but the man being a great brute, I suppose he proceeded to force him to take it; his friends on the next visit took him away, and I did not see him afterwards.

Is there any other case within your own knowledge?—I frequently witnessed his striking patients, hundreds of times.

Striking them with his fist?—Yes, in the belly, so that I have been astonished they did not drop down dead on the instant.

Did you often make complaints to Mr. Talbot, of the extreme unfitness of that keeper, from the cruelty of his disposition?—I have told him how very improper a person he was to have the care of gentlemen; in fact he was generally drunk. I believe he was drunk every afternoon; his misconduct had been represented by a great many persons besides.

How long were those complaints of yours made, antecedently to the keeper's discharge?—He kept him many years after those complaints.

Do you know that Mr. Talbot was at times a witness of the severities used by this man to the patients?—Certainly.

Was Ramsbotham the principal keeper of the house immediately under Talbot?—He was; he was the keeper on the gentlemen's side, having the sole management of them.

Did you ever complain to Mr. Warburton, the proprietor of this house, as to the conduct of this keeper?—No, I do not recollect that I made any particular complaint to Mr. Warburton; but it was made to him, and I recollect he had some words with Mr. Talbot for keeping him; the man was once sent away, but it was only for a few months, and Mr. Talbot had him back, and made him keeper of the parish patients.

Mr. Talbot was the manager under Mr. Warburton?—Yes it is called Warburton and Talbot, but I believe Mr. Warburton is the principal; the bills are made out in the names of Warburton and Talbot.

Do you know, of your own knowledge, that the bills that were sent from Mr. Dunston were sent to Messrs. Warburton and Talbot, or to Mr. Warburton only?

only?—They were directed to Mr. Talbot, and Mr. Talbot paid them all; the bills were made out to the patients whom we attended.

How do you know that they are partners?—I believe that they are not, but they write out their bills in the names of Warburton and Talbot.

Did you communicate what you had seen, as to the cruelty of this keeper, to Mr. John Dunston your employer?—Yes; I have mentioned in the course of conversation what a very improper person he was, as well as others, who were very improper to be kept there.

Did you ever learn from Mr. Dunston that he had communicated your information to Mr. Warburton?—No, I do not exactly know that; but I know Mr. Warburton knew it, from his having scolded Mr. Talbot repeatedly for keeping him.

In your presence?—No, but Mr. Talbot so informed me; I was very intimate there, and heard it from him; he was well known to be an improper person in the house, in the opinion of all parties.

As you yourself did not communicate to Mr. Warburton any of the facts respecting Ramsbotham, are you aware of any precise fact, shewing that Mr. Warburton had notice of it?—I know, because he reprimanded Mr. Talbot very severely, as Mr. Talbot informed me; I must have heard it, both from Mr. Talbot, and from my sister, who was there; the man was sent away, and afterwards restored to be keeper of the parish paupers.

Do you know of any act of cruelty that he committed after he was so brought back to these people?—No, I did not visit the house then.

By whom was he brought back to superintend the parish paupers?—I suppose by Mr. Talbot.

Has Talbot the management of the parish paupers?—Yes, he manages them as he thinks proper.

It appears, in your book, that a patient was frequently thrashed on the bare back with a knotted cord, by one of the keepers, assisted by another; was that done in your presence?—No, it was not; that was a circumstance related to me by a patient who had got well, and who now continues well; he related the circumstance to me as if I had seen the thing, saying, you recollect how cruelly that man Rogers was treated; he then said, I have seen Thomas Dalby, who was a keeper, and a man of the name of French, a convalescent patient, one with one hand, and one with another, lashing him with a common piece of bed-cord, and that at sundry times, beside otherwise using him ill by blows.

Did you ever hear that statement confirmed by any one else?—No; but I have no reason to doubt the fact, because the patient was perfectly well when he informed me of the circumstance.

Did you ever ask the patient?—No, I do not call the patient to mind among so many of them.

Do you know any case in which a patient has suffered from the force with which an instrument has been driven into his mouth, to make him swallow?—I have known sundry instances where the mouth has been lacerated, and the teeth forced out, and I have known patients suffocated. I have not witnessed it, but I have seen the body immediately afterwards. I recollect Mrs. Hodges, the wife of the vestry clerk of St. Andrew's, Holborn, dying in this way. I do not suppose that there is a keeper who has been in these houses four or five years, who has not had patients die under their hands in the act of forcing.

What do you know of the circumstances of the death of Mrs. Hodges?—On my visit to the White House, I think in the year 1811, I was requested to look at the body of Mrs. Hodges, who had that instant died, and who I understood died under the hands of Mary Seal.

How did you get information of the cause of her death?—From my sister and the keeper, and two or three more, that were round about.

What did they tell you?—That she died while Mary Seal was forcing her to take food.

Did you speak to Mary Seal upon the subject?—No, I believe I did not; I do not recollect.

Why did you not?—I do not think that it would have been of any use; it is a method they commonly pursue.

Were these events of such common occurrence, that you considered them as not of sufficient importance to speak to the person under whose hands a patient in the house you attended had died?—I spoke to them as to its being a very shocking sort of thing, but I had no remedy; I could not have that authority to speak I should have had, if I had been in Mr. Dunston's place.

MINUTES OF EVIDENCE TAKEN BEFORE COMMITTEE

Mr.
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Did you report it to Mr. Dunston on your return?—I dare say I did, but he must have known it from other circumstances.

Did you mention it to Mr. Talbot?—I do not recollect; perhaps Mr. Talbot was not in at the time.

Did you ever talk to Mr. Talbot, as to the death of this individual?—No, I do not recollect that I did.

Do you know from the same source of information, that these effects of that mode of forcing often occurred?—I have not witnessed any of them, but I do believe they are very common, because I have seen them force gentlemen, and I have seen them very near death; I know it is their common mode, and death frequently has occurred.

What is the mode of forcing patients to take food that is practised in that house?—They have a vessel resembling a tea-pot, sometimes with a very long spout; I have seen it with a very short one; the patient is laid on his back, held down by one or two keepers; one has a cloth in his hand, and the other opens his mouth by means of a key. I have never seen any thing else used but a large key for opening the mouth; the spout of the pot is forced into the mouth, the nose is held by an assistant-keeper, and the cloth immediately clapped over the mouth; in this state the patient must either swallow or die, unless they desist. I have seen them black in the face.

You have seen patients resist swallowing?—Yes, till they have been upon the point of death; my opinion is, that they often poke the spout of this thing too far, and that the food passes down the wind-pipe, and suffocation ensues.

Do you know any other mode of forcing persons to eat?—No, I do not know any other mode; but I think there might be a better contrivance for opening the mouth.

Then there would be the same difficulty in the compulsion to swallow?—Yes; there is no other mode that I know of, unless it is done by coaxing.

Were you in the house when Mrs. Hodges died?—I was.

Were you called immediately afterwards?—I was going up stairs, when my sister or some of those round called me, and said Mrs. Hodges has died while Mary Seal was forcing her.

How soon were you present?—In a few minutes, I suppose.

What was the appearance of the countenance?—It had not any particular mark on the countenance, except about the mouth, where the lips were lacerated.

Was the appearance of the face that of suffocation?—No; but those appearances would very soon disappear. I could not say she was suffocated, but from their account to me.

She was past recovery, though warm?—Yes.

Do you apprehend that many of the patients would actually be starved, if they were not forced to take food in this or some other way?—I think that some would, and some not; some have a greater degree of obstinacy than others.

Then would you not recommend that this dangerous mode of practice should be deferred as long as possible, to see whether the patient would not take food in the natural way?—Certainly, I should.

In this instance of Mrs. Hodges, had this method of forcing her to take food been delayed to a late period?—No; for the woman was walking about very well the day before, and I believe she took her food the day before; she had been there but a very little while.

Then if she took her food the day before, do you think it was necessary to use force in this dangerous way?—No, certainly not; I think it is very often unnecessarily applied.

If this woman had taken food the day before, for how many days might this practice of forcing have been delayed, in your opinion, supposing she was a healthy woman?—Three or four days, or perhaps longer.

In your opinion, the forcing of this woman was quite premature, that it was not necessary to be adopted at that time?—It was not absolutely necessary; but I suppose they thought it so.

Have you ever pointed out any other method of giving persons in that situation food?—I have not. I have told them that I thought the point of the spout was a great deal too long; I do not know of any other mode they could pursue, unless by mild methods they might coax the patients to take a little now and then, repeating it frequently, and so sustain life.

Do you know in this house, whether it is the practice if a patient refuses to eat, every day to force him?—Not all patients, it depends upon particular circumstances; any refractory patient they force.

Do

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Do they force them daily?—Yes, sometimes four or five times a day.

Do you think that is necessary?—I think it is necessary they should take food in some cases, often in small quantities, if it could be coaxed down.

It is your opinion, that this practice of forcing is attended with a danger of suffocation?—Certainly; always very great danger, where it is used in the manner I relate.

In the way in which it is used in this house?—Yes, in all houses. I have seen it in different houses in the same way; that is the usual way pursued in all madhouses.

Would you practice this forcing on the second day after a patient has refused food, or on the third day after a patient has refused food?—Not if a patient was in tolerably good health.

How soon after the refusal to take food should the force be applied?—That would depend upon the state of the patient; a patient is sometimes saved by repeatedly giving nourishment; it does not happen that this is required to one in twenty, but only to patients who absolutely refuse to take any thing.

Upon your examination of the body of Mrs. Hodges, could you safely state, whether or not the suffocation had proceeded from the mis-direction of the liquid, or not?—If I had opened the body I could have ascertained that, but I did not examine it.

Do you know, whether any coroner's inquest sat upon the body of Mrs. Hodges?—I cannot speak positively; but I feel pretty well assured, that there was no coroner's inquest.

Is it the custom to call in the coroner in case of sudden death in these houses?—Only when they cut their throat, or hang themselves, or die in any way by their own hands; but I believe, even in these cases, the jury is not always summoned.

Not in cases of death by suffocation?—No; neither do I suppose the friends know any thing of the circumstance under which they die.

Did you examine the inside of Mrs. Hodges's mouth, to ascertain whether any mischief had been done by the instrument?—I did not.

As you state, that cases of suffocation, from the practice of forcing, have been frequent in this house, do you recollect having been called upon at any precise time to attend any patient who was undergoing the practice of forcing?—No, it is thought so light of, that they would not think of asking any medical person to stand by.

Knowing it to be so dangerous, have you ever suggested to the manager of this house, that it would be right for medical or surgical assistance to be called in, when the practice was resorted to?—No, I never did; I do not mean to say it is the practice of that house particularly, it is the general practice in all houses I have visited.

Can you, from your own knowledge, speak to any other cases of cruelty or gross neglect, that have taken place in either of the houses you have mentioned?—I can; I have known the masters of the houses neglect to go round and see the patients, for a period of two months, which, I think, is very great neglect. I speak of Mr. Talbot and Mr. Rhodes likewise.

How do you know the fact?—Because the patients have told me, they have said, where is Mr. Talbot, we have not seen him these two months? and my sister has informed me the same.

Have you received any communication from your sister, now in France, upon the situation of Talbot's house, in which she was housekeeper?—I have.

Was that letter in answer to any queries you sent your sister?—Yes; I wrote over to her, and desired her to commit to paper those circumstances she had been witness to, and which she knew had transpired in the White House. In consequence of that letter, she wrote me this answer:—

The Witness read the LETTER, as follows:

“ Dear Brother,

“ Montreuil, January 11, 1816.

“ Agreeable to your wishes I here state to you some of the cruelties, &c,
“ to which I have been an eye-witness, during my residence in the White
“ House; to the truth of which I am ready to come forward, and state on
“ oath, if necessary, respecting the gentleman who was choked in the act of
“ forcing, by Samuel Ramsbotham. Although I have known instances of
“ the kind occur, yet I was not present at this one, but received my infor-
“ mation from Mrs. Talbot's own mouth, as follows:—A gentleman who was
“ confined in a room over the one in which the family sat, refused to take
“ his food, on which Samuel Ramsbotham proceeded to force it down, in the
“ usual

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" usual way, but used such violence, that the patient called loudly for assistance, saying, for God's sake, Mr. Talbot come and help me, or I shall be killed by this man. Mrs. Talbot said she could not persuade Mr. Talbot to go up and see what was the matter, and the keeper came shortly after to inform them, the patient went off in a fit while he was forcing him.

" Mrs. Talbot also informed me, that when Mr. Talbot was going through the poor men's hall one day, a patient struck him, on which he gave the poor man so violent a blow, that knocked his eye out, and that this patient died shortly after.

" I have repeatedly witnessed the orders of Mr. and Mrs. Talbot to Betty Welch, to confine Isabella Adams of Saint George's Hanover-Square, to her crib, with her wrists and legs locked when she became high, and while thus confined to flog her with a common hand-whip, which she did. I have seen the blood follow the stroke, and leave marks in her flesh bigger than my finger, and have myself received many a severe stripe, in endeavouring to protect her from such cruel treatment. I need not tell you of Betty's cruel disposition, as you have often seen her treatment of the poor creatures under her care; the cruelties I informed you of, respecting Bridget, is perfectly correct. I have caught her flogging the poor women under her care out of their cribs with a birch broom; and when they were completely naked, force them into a tub under the pump in the yard, to wash them from their filthy state, even with the snow on the ground. As to the wine, the patients certainly have not more than half a glass for a glass, and half a pint for a pint, and the spirits to those who take it in the same proportion; but as for the porter, they fare better, as far as I know, though the patients often complain, that some of the keepers drink it from them; indeed I know the accusation to be true enough. When I first went to this house, the female patients were in a very lousy state indeed, and I was obliged to iron all the blankets on the women's side the house, to destroy the vermin; you must certainly recollect the state they were in when it was said to be a humour in the blood. I assure you it arose from the quantity of vermin about them, and was the consequence of excessive scratching. The frauds committed in the linen-room are very great; when patients are brought into the house, a proportion of their clothing are put by in the store-room. The patients wear their old linen longer than intended by their friends, so that in due time, when their friends visit them, they are informed how much the patient destroys his or her clothes; that he or she must have a fresh supply, which are accordingly provided; the things thus accumulated are sold by the mistress to the master, for the purpose of clothing those patients whom he provides for; this is a perquisite of the mistress, by which and other perquisites, she informed me brought her in three hundred a year; it was my business to make out an inventory of these things, together with the bills. The parish patients are also deprived of their clothing; more than a third part of it from their different parishes is kept back; I have myself, by order of Mrs. Talbot, cut up fifteen new flannel petticoats at a time, belonging to the parish of Saint Mary-le-bone. Mr. and Mrs. Talbot have both frequently told me, that the linen-room at Saint Luke's Hospital was managed the same as their own, and frequently called me to see the clothes which came from thence, with the marks cut out and others put in; also, that their poor patients are kept there in a crib of straw the whole year, until their limbs become contracted; indeed I remember one patient coming from that Hospital in this state. I have heard Mr. and Mrs. Ford frequently assert, that the patients at Saint Luke's are cheated of the things their friends send them, and that they have not even the full allowance of the house. I have known Mr. Talbot neglect to go round the house for a period of two months. I have had the whole management of the concern for months together, without his visiting a patient.

" Mr. H. unites with me in kind remembrance to Mrs. Rogers and family.
To Mr. Rogers, Surgeon, &c. " Your affectionate Sister,
30, Broad-street Place, " A. Humieres."
Moorfields, London.

What is the bill you have in your hand?—That is an inventory of the clothes which were sold by the mistress to the master of the house, from out of the store-room.

What does the store-room contain?—Clothes belonging to the different patients of the house; other things are kept in the room, such as soap and candles, and so on; but those are kept in a separate part of the room.

In whose hand-writing is that bill?—My sister's, at the time she was house-keeper.

What

What does that purport to contain?—It is a bill of Mrs. Talbot's, to her husband, for clothes delivered out of the store-room, which I believe to have belonged to the different parishes.

The clothes kept in the store-room are those belonging to the patients?—Yes, the patients and the parishes.

[The Bill was delivered in, and read as follows.]

	s.	d.		£.	s.	d.
16 gowns - - - - - at	10	0	each - - -	8	0	0
6 stuff coats - - - - -	5	0	each - - -	1	10	0
24 shifts - - - - -	5	0	each - - -	6	0	0
25 caps - - - - -	1	6	each - - -	1	17	6
8 shirts - - - - -	7	0	each - - -	2	16	0
11 pair worsted stockings - -	2	0	each - - -	1	2	0
15 pair cotton ditto - - -	2	6	per pair - -	1	17	6
18 pocket handkerchiefs - -	1	6	each - - -	1	7	0
24 flannel coats - - - - -	4	0	- - - - -	4	16	0
17 aprons - - - - -	2	0	- - - - -	1	14	0
14 shawls - - - - -	2	0	- - - - -	1	8	0
6 pair shoes - - - - -	5	0	- - - - -	1	10	0
				£. 33 18 0		

Was it in this house that you saw several wretched females lying together in cribs in the month of November, and in what year?—It was not in this house, but in Rhodes's house, in the month of November 1811.

Describe the situation in which those persons lay?—The crib was close to the door leading into the poor women's yard, there were three in each crib; I am not certain whether there were three cribs, but there were two with three patients in each; the cribs were calculated for one person only, there was not the smallest particle of straw in either of them.

Did you ask the female-keeper why she kept them in those cribs, and why there was no straw?—Yes, I did.

What was her answer?—That her master informed her there was no straw in the house, and that she must wait for it till it came; those cribs were their usual sleeping cribs.

This was in the daytime?—Yes, but the maid informed me they had but one shift each, and that she was obliged to put them to bed to wash their shifts against they got up in the morning; possibly the other might have been deposited in the store-room.

Were those patients pauper patients?—Yes, they were.

What was the general situation, at that time, of the pauper patients in the house?—I do not think the pauper patients are well regulated there at all; these people had no covering on them, they were naked in the cribs.

Was the weather cold?—It was frosty weather, so that I had my great coat; there was a piece of common carpet lying over their backs, and they were sitting huddled up together; the carpet was of no more use, as to warmth, than if you had laid a board over them; there was no covering over their legs or thighs.

Do you believe that they passed the night with no other covering?—Yes, and many other nights besides.

Did you ever see a woman in that situation, and the following morning find her dead?—Yes, on the right hand side in the corresponding crib; there was straw in that crib.

Was she the preceding evening ill?—No; she was brought in only a day, or two days before.

Had she clothes?—No, no clothes.

Was she very violent?—No; I did not see any of those patients in a confined state in the crib, it was not necessary, they were quite harmless; one of the patients came and asked me to see the body of a poor creature who lay dead there, she was cold and stiff at that time, having died in the night.

Did you not, as visiting surgeon, inquire the cause of her death?—I did not; I had no doubt but she died from cold.

Did you not consider it part of your duty, as the visiting surgeon of that house, to inquire into the cause of the death of an individual whom you had seen the day before in a state of health?—I cannot say that I did inquire, it is very likely I might have some conversation with the keeper about it.

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Do you recollect to have made any complaint upon the subject?—I had frequent conversations with Mr. Dunston and Mr. Talbot at the next house, as to their cruel method of treating patients.

Do you know whether any coroner's inquest sat upon the body?—No; I should think not.

What was the common covering of parish paupers in Rhodes's house at that period?—Common hop-sacks cut up.

Speak to the treatment in Rhodes's house of the male patients; in what manner do they lie together at night; do they lie more than one in a bed?—Commonly two in a bed.

Do you know that they lie three together, in any instance?—No; I cannot bring that to my recollection.

How are they supplied with covering; with bed-clothes or straw?—There are straw patients, and others who sleep in beds.

How are the male pauper patients circumstanced during the night; how are they secured from the weather?—By bed-clothes, but the covering is very thin, and there are also straw patients.

Are they sufficiently supplied with straw?—No, they are not; I think in that house in particular they have always been very deficient in straw.

Is the straw dirty sometimes?—Yes; I have seen their faces covered with nastiness, so that the straw must have been very dirty indeed.

Did two men lie in the straw beds together?—No, they lay two in a bed together, but not in the straw, that I recollect; they were separate.

The straw was insufficient?—Yes, and very dirty; they have the hempen rug for a covering.

Did the pauper patients appear to suffer very much from the cold?—Yes, very much.

Were you ever professionally called upon to relieve those patients who suffered from cold, from losing their feet?—Yes, I have taken off the toes from mortification having taken place, and I took off both the feet of a young woman in the White House; she was a young country girl, of about nineteen years of age.

What is the ordinary position that you find those miserable people lying in, who suffer from cold?—They are curled up in as close a compass as they possibly can be, to keep themselves warm.

Have you any doubt that contractions in the limbs result in consequence of that mode of lying?—No, not any doubt at all; I know it is in consequence of their constantly lying in that position. I know a gentleman, who was reported to me to be Captain Hay, of the Guards, who was removed from the cellar at Whitmore House to the White House; he always lays in this position.

Were his limbs contracted?—Yes, completely so; I never saw one so contracted in my life.

Do you conceive that arose from cold?—He slept in this cellar at Whitmore House a good many years, and I dare say he must have experienced a great deal of cold; I have no doubt he received great injury from lying in the form in which he did.

Have you a doubt that cold created the necessity of taking off the feet of the young woman you have referred to?—I know that was the cause; mortification ensued, and I was obliged to take them off above the part mortified.

Are any other diseases prevalent amongst these people, besides the affection of the feet?—There are many who die of consumption, and various other complaints.

Are consumptions common?—Yes, they are.

Is there an infirmary at Rhodes's?—No.

So that sick and well live together?—Yes; Mr. Warburton has stated in his evidence that there were nursing-rooms and warming-rooms. I never knew of any nursing-rooms; there is a warming-room or rather a warming closet in the White House, a very small space, about five feet by nine or ten, I should think; and there are places for them to do their occasions, on which patients sit who have a relaxed state of bowels.

Have you seen many there?—Yes; I have seen fourteen or fifteen there at a time, which has rendered it so offensive, that I could not bear to remain in it.

Did the pauper patients at Talbot's house, appear generally to suffer from cold?—Yes, very much.

Was the place in which they were confined, damp as well as cold?—It was very damp; there is a spring of water in the poor men's sleeping apartment.

Were

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Were there fire-places in the rooms where the paupers slept?—No, there were no fire-places in the sleeping rooms.

Were the sleeping rooms damp?—They were washed down every morning. I think the typhus fever which raged there originated from the dampness of the rooms, and being too crowded. I discovered it was typhus fever by mere accident. I did not visit the pauper patients at that time, but they were visited by a person who lived in Bethnal-Green; and he being ill, requested Mr. Rhodes to ask me to see a few pauper patients who were unwell; and upon seeing them I said, you have got typhus fever among them, and of the worst kind. I informed Mr. Dunston and Mr. Warburton; the greatest attention was paid, but I was informed before I began seeing them that twenty had died.

In that house and the next, how many died?—I think more than a hundred.

When was this?—In the year 1810 and 1811.

Do you believe that that typhus fever was brought into the house, or was the result of dirt and cold and damp?—I think it was very likely to result from the patients being very much crowded, but I was not in the habit of going amongst the pauper patients at Bethnal House at that time; I have since.

Was it your opinion, from the state in which you found those houses in which the typhus fever had broken out in 1811, from the dirt and cold and filth universally prevalent, that you might expect a disease of the same nature any day to enter?—Yes; I do think it might occur at any time from those causes.

Were the patients very much infested with vermin?—Yes, they were.

And the houses with bugs?—Yes, the White House particularly; I have seen thousands together crawling on the walls, and the patients very much tumified from the bites of them in the night; all the walls are daubed with bugs killed against them.

Were rats very prevalent?—Yes, very much so; I have seen a woman call thirty or forty rats together at one time in the course of a moment, from being tamed by her; she had been used to feed them, and I dare say they would have eaten her, if she had happened to die in the night.

Did the patients complain of being infested by rats?—Yes, I have seen severe wounds inflicted by the rats on those that were confined.

How often are fresh blankets given out to the patients that dirty them?—The same blanket is used the same night, having been previously washed during the day.

Do you believe that it is in a state sufficiently dry?—No, I do not think it possible that it can be.

Have you ever felt a blanket that had been given out to a patient as a dry one, that was in a state that it ought not to be?—No, I have not; I have seen them put into a tub of water, and washed with a common birch-broom, and I think that there could not be time to dry them sufficiently fit for use.

Veneris, 23^o Die Februarii, 1816.

The Right Honourable GEORGE ROSE in the Chair.

Mr. John W. Rogers again called in, and further Examined.

YOU have stated in your evidence yesterday, that Mrs. Hodges died in the hands of Mary Seal, who had been forcing her in a cruel manner to take food against her inclination; did you make a communication of that to any body, and to whom?—I did not speak on the subject, except to the people round about, that I recollect.

Were not you of opinion, that in such a case it would have been expedient to have called in the coroner?—Yes, I am of that opinion now, certainly. I have found since yesterday an extract from a letter from my sister to me, she says, "Mrs. Hodges, late wife of Mr. Hodges, vestry clerk of Saint Andrew's, Holborn, expired under the hands of Mary Seal by forcing; you must recollect the circumstance, as you came in at the instant, and saw the woman; I do not believe she died from ill usage, but from extreme fright at being forced."

In your evidence yesterday, you spoke of the use of spirits in one of the houses; is that usually allowed?—Yes; to old people whose friends wish them to have it; they are very old, and like to have a glass at their lunching time.

Are you of opinion that is fit and safe for patients in that disorder?—Certainly; to patients in that stage of life, and who are perfectly quiet; it is not given in that quantity to do the slightest injury; it is given to patients that walk out.

Mr.
John W. Rogers.

Mr.
John W. Rogers.

Do they give it them raw or mixed with water?—Some raw, and some mixed with water.

You gave an account yesterday of the mode by which lunatics when refusing food, are compelled to swallow; the cloth is applied to the mouth?—Yes; after the spout is introduced.

So that the patient must either empty the pipe which is loaded with food, or no air can come to the lungs?—Yes; unless the keepers were to desist.

Would it not be possible to form an instrument perforated, instead of the towel, so as to prevent the suffocation which ensues?—If the person can breathe at all they will not swallow, consequently such an instrument would be of no use.

From hence have come to your knowledge frequent instances of suffocation?—Yes; I believe it to a very common occurrence in most houses. I except those houses which have lately been established upon a much better plan, such as Dr. Rees's at Hackney; I never saw patients treated in any other houses like the patients in that house. I wish it to be understood, I do not speak from partiality, for I am but slightly acquainted with Dr. Rees. I have very frequently heard of the kind treatment patients receive in Mr. Fore's house at Hackney, which I believe to be conducted on a humane and liberal plan.

When did you commence medical visitor of those houses you referred to yesterday?—In 1801 or 1802.

How long did you continue?—I was away a year or two. I went to South America, and came back to Mr. Dunston; but generally from 1801 to 1812, and a great part of the year 1813, I visited; after, I left Mr. Dunston and commenced business for myself.

Are you connected with any of the houses you speak so highly of now, either directly or indirectly?—Not at all, either directly or indirectly.

Where those six women you found crammed together in two single cribs, pauper patients?—Yes, they were, and they were quite harmless women; they were not chained.

Do you know to what parish they belonged?—No, I do not.

Do you know the allowance of linen to each woman?—I do not.

Are you acquainted particularly with the circumstances of Whitmore House, and the accommodation of the patients there?—Yes, I am.

Describe the accommodation of the patients in that house?—I think Whitmore House is too much crowded, that there are not sleeping rooms sufficient for them. That the cellar below, commonly termed the lower regions, is a very improper place for any person to be confined in, and when the house is shut up at night, the smell is very disagreeable indeed.

Did patients pass their nights underground?—Yes; I stated yesterday that Captain Hay lay there for many years; I have heard twenty. A Colonel Gillespie, I believe, died there; I saw him just before his death, in a very emaciated state; a few weeks before he was a very fine handsome man.

Were those apartments cold and damp?—They were; they were below the surface of the ground; the patients there lie in wooden cribs.

Is the apartment there floored?—I believe it is.

Are those cellars ventilated?—They are very ill ventilated; the necessities are close by, so that they cannot be sweet; it is a place where they confine what they term the dirty patients. When I saw Colonel Gillespie the whole of the nates were gone, and his back was completely raw; he was in the habit of being washed with a lotion, which the keeper applies, and which I think an improper thing; in my opinion there ought to be regular nurses for such patients who are harmless, that more humanity and tenderness may be shewn.

What do you apprehend to be the immediate cause of his back being in that state?—From lying in his wet and filth; it always produces that effect.

Was he a pauper patient?—He was a colonel in the army.

How came he to be in this miserable neglected state?—I cannot tell; but suppose his friends did not, or perhaps could not support the great expenses which must have accrued at his being first sent there.

Do you know what allowance was made for him?—No, I do not. I know it is very handsome in that house particularly; it is a house for the higher class of patients.

Are you aware of the practice in any of those houses of tying a towel or cloth over the mouths and round the heads of the patients, so as to render respiration extremely difficult and painful, to prevent their talking?—Yes, I have frequently seen it; it is a very common practice, and termed muffling them.

In the attempts to force the patients to eat, such as you related yesterday, when the nose is stopped, the mouth full of food, and the towel drawn over the mouth, do

do you conceive it to be possible for a man to breathe, without at the same time taking some of the food into the wind-pipe?—No; I should conceive it most likely that he would take some of it into the wind-pipe; but if a man's nose is stopped up, and a towel over his mouth, he cannot breathe.

What is the consequence of its going down the wind-pipe?—Suffocation; but if he makes an effort to swallow, he will swallow without its going into the wind-pipe.

Do you know the long gallery at Whitmore House?—Yes, perfectly well.

Have you ever been there at night;—Yes, frequently.

Is it at that time empty or full?—Full; the beds are let down which have been shut up in closets, the patients sleep in that gallery; in fact, I have seen them sleep in the visiting room, which shews the house was too much crowded. I have seen beds in the common parlour on the right-hand side.

Are those beds which you speak of as being shut up in closets open, to view in the daytime, so that any accidental visitor would suppose the gallery to be made use of as a sleeping apartment?—No, they are not; any body visiting the gallery would not know that any person slept there at night.

Is this gallery, as well as the other parts of the house, so full of patients at night, as that you would deem it crowded?—No, I should not call it crowded, because there are not so many beds as to crowd it, or for the patients to inconvenience each other.

The patients who sleep there mix in the daytime with the rest?—They do.

Do you know whether those patients who sleep in the long gallery are men or women, or both?—They are men only.

Do you know by whom they are attended?—By men-keepers.

Have you never seen any women employed in superintending or attending to the men-patients in that gallery at night?—No, I do not recollect that ever I did.

By whom were the beds made?—By the maids of the house, I believe.

Have you seen them so employed?—I do not recollect that I have; I have seen those beds when I have been there late at night; there is a house-maid, and I believe it is her business to make the beds.

Can you say whether the commissioners who inspected the house, knew that it was the practice to fill this gallery at night with patients?—I do not know whether they knew of it, or not.

What extent of inspection did the houses with which you were acquainted, undergo from the physicians who were appointed to that service by the college? I understood they generally went through all the rooms; but it is my opinion that all the rooms were not shewn them; they are said to go through the whole of the apartments, but I do not believe that they have seen all the places; and what confirms my opinion is, that they never saw the cellars at Whitmore House.

The Committee understand you to believe, that the inspecting physicians did not see all the apartments in these houses?—I believe they have not.

Do you believe they saw the room in which Colonel Gillespie was confined?—No, I believe they never saw what the people of the house term the regions below.

Do you attend professionally at any madhouse now?—No, I do not.

What, in your opinion, would be an inspection so effectual, as to prevent any of the abuses which have been stated by you?—I think that inspection should take place at all hours, as I have stated in my pamphlet.

By whom?—By any proper persons appointed. I do not think it should be confined to any particular persons.

Have you no opinion, about what the nature of the inspection would be that would be most effectual?—It should be a person who has been conversant with mad people, who knows those houses, and is not afraid of going amongst the patients, and talking with them.

At what times do you think they should go?—At all times; I think the house should be sometimes inspected in the evening, after the patients were gone to bed, and sometimes in the morning, before the patients were up; for if they have any notice at all, before they can go round the house the evil is removed, and the commissioners seldom get at any thing. If a patient wishes in their passing through the room, to say any thing to them, the master will interfere, and say, Oh, Sir, he is very bad, or he wants to get out; and very little attention is paid to what he says.

Can you state any expedient that would reduce to a certainty the visitors seeing all the patients in the house when they visit?—No; I cannot state that at the moment.

Mr.
John W. Rogers.

Have you ever known an instance or instances of persons of sound mind being confined as of unsound mind?—I do not recollect that I have.

Would not the signatures of two medical men to the certificate of insanity give great security against unnecessary confinement?—Yes; I think the certificate should be signed by two persons.

Have you any other information to give respecting the cruel treatment of patients?—At the White House, my sister communicated to me, that she witnessed Betty Welch feeding Mrs. Elliot with meat cut of a proper size, and with each mouthful she forced down a tea-spoon full of salt; on her asking why she did this, she said it was to make her thirsty, because she would not drink. I myself witnessed the appearance of Mrs. Elliot, there was a complete discoloration of the whole face, and neck and arms; and in consequence of ill-treatment her husband took her away from the house, and wrote complaining to Mr. Warburton.

Was the discoloration in consequence of her being fed as you have described?—No; in consequence of her being beaten; that arose from violent blows.

Was the slaughter-house at the White House turned into a room for pauper patients?—It was merely closed up; the flag stones were not taken up.

Describe the nature of the room?—It is a large dark room, flagged with stone.

Was there any fire-place in it?—No; nor no light.

How many people slept in it?—I should think twenty or thirty.

Were they upon straw?—Yes; in straw cribs.

With blankets?—Yes; they had a rug.

Were you ever there during the cold weather?—Yes.

Did they seem to suffer much from cold?—Yes; I should think they must, from the way in which they lay.

Was there a place which had been a hog-sty, which was called Bella's Hole?—There was.

Describe the nature of the place?—It is a small square hole, boarded up very high with planks, and planked over at top like a watch box, only larger.

What size?—Three or four feet square.

Did you ever see a person confined in that place?—Yes; I have.

What was his name?—Charles Green.

Could he lie down at full length?—From corner to corner I should think he might.

Did he lie upon straw?—I have seen him with very little straw indeed.

Without clothes?—Yes; completely without clothes.

Was he chained?—No; this was completely dark, and it was strong enough without chains.

How was light admitted into that place?—By means of a few gimlet holes in the roof.

Do you know whether he was confined there for any length of time?—Several months.

What became of him?—He was sent to Miles's after that; he was a man belonging to His Majesty's ship the Canopus; and he went out to India, and was sent home in one of the India ships as mad. He made his escape from the ship, jumping out of a port-hole, and was brought to the White House; and he made his escape out of the White House, and was brought back again. He was a very powerful man.

Have you a clear recollection of the state of the young woman whose feet you were obliged to take off for mortification?—Yes, I have a perfect recollection of her.

Can you take upon you to say, as a professional man, that that mortification, from the progress of which you were obliged to take off her feet, might have been prevented by proper treatment?—Certainly, it might; but it had gone too far before they were shewn me.

How long had you seen her previous to performing the operation?—I did not see her till the mortification had taken place.

You mean then to say, on your professional character, that you are convinced it was owing solely to the neglect which she had experienced, and the cold to which she had been exposed, that that disorder, and the consequent mortification, came on?—Yes, I do.

Did you make known your opinion of her case to any body?—I informed the people of the house that she would lose her feet when they were shewn me.
I endeavoured

I endeavoured for some time to save them, but in vain. I did not conceive there was any necessity for making a complaint to any one there.

Did you not feel it necessary to complain, in consequence of finding that the feet of this young woman were reduced to this state?—No; I had often stated the importance of their being kept warmer, to prevent mortification, as it was a very common occurrence.

You never did, in fact, make any remonstrance or complaint to the master, in consequence of the neglect of this young woman?—No, I did not conceive there was occasion; it was a common occurrence in the house, and the master had previous knowledge that it was a necessary operation; and when I went in, I performed it without saying a word to any body.

She was a pauper patient?—Yes.

In what place did you separate them?—I took the whole of the toes off near the instep, so that she could not walk.

Did you make any remonstrance or complaint in consequence of this, which you say was owing to neglect?—Yes; I have made general complaints, and attention has been paid to those complaints.

To whom have you made those complaints?—To the master of the house.

Jovis, 27^o Februarii, 1816.

The Right Honourable GEORGE ROSE in the Chair.

Sir Henry Halford, Bart. called in, and Examined.

HAVE the goodness to state to the Committee, whether, in your opinion, medical advice is likely to be useful in cases of insane persons?—I have no doubt of it; it is most useful in the early stages of insanity; but it is useful also in the progress of the disease, particularly where it recurs in paroxysms; and it is occasionally useful in confirmed lunacy, though the good effect of it is less certain in the advanced stages of the disease. This, however, is analogous only to what is found to be the case in other distempers.

Can you form any probable conjecture of the proportion of cases in which medical advice might be useful, if applied early?—I cannot; it is necessary to know the circumstances of each case, and its history, before a physician can say to what degree medicine may probably be of use. I consider insanity to be connected with bodily indisposition, throughout its course, though this be less apparent in some cases than in others. It is obvious in the instances of females who become deranged after lying-in; this is, perhaps, the most remediable specimen of the disease; it is obvious also, in that modification of the malady which we see in females of a particular temperament, at a certain period of life, when they sometimes become melancholy; and it is striking in the cases of sailors, after a great sea-fight, where there had been previously great earnestness, much personal exertion, protracted watchfulness, and, after the conflict, an improvident indulgence in spirituous liquors. These combined causes produce great irritation of the brain, and derangement; but such patients generally get well. I remember to have seen at least twenty sailors in a state of derangement, in one house of reception of lunatics, after Lord Howe's victory on the 1st of June. I have stated that medicine is essential in the progress of insanity, more especially where the disease is wrought up into paroxysms, and recurs with violence in that form; in such paroxysms there is an appeal to the skill as well as to the humanity of the physician, beyond what arises in almost any other disease, for the body labours in this unhappy predicament until it is destroyed; I have seen several patients die in this painful manner. If medicine be less useful in the confirmed periods of insanity, it is as little so in the advanced stages of other chronic disorders. In cases of incapacity of the joints, with painful swellings upon them, from chalk stones, after repeated fits of the gout, medicine has no effect upon these depositions; yet this is no argument against the use of medicine in the first attacks of gout, to prevent, if possible, such dismemberment and deformity. Again, in the instance of palsy, when a patient has lost the use of half his body; in this stage of his complaint medicine has very little sensible effect upon it; but if the patient be assisted in the earliest attack of his malady, whilst under apoplexy, which generally precedes palsy, not only may his life, possibly, be saved, but the paralytic symptoms prevented altogether, or at least considerably mitigated. But we have much to learn on the subject of mental derangement; and I am of opinion, that our knowledge of insanity has not kept pace with our knowledge of other distempers, from the habit we find established, of transferring patients under this malady, as soon as it has declared itself, to the care of persons who too frequently limit their attention to the mere personal security of their patients, without attempting to assist them by the resources of medicine. We want facts in the history of this disease, and if they are carefully recorded, under the observation of enlightened physicians, no

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Mr.

John W. Rogers.

Sir Hen^d Halford.

Sir Hen^d Halford. doubt, they will sooner or later be collected in sufficient number, to admit of safe and useful inductions.

Have you any opinion as to this advantageous application of medicine, to cases of derangement not arising from temporary bodily causes, but from causes which may be classed as hereditary family ones. In the early developement of these cases is not medicine advantageous for repelling the malady, if not for the purpose of radical cure?—Such cases are usually most difficult to cure; the, pre-disposition in the frame being strong, external accidental causes act with more violence upon it, and more easily upset reason.

Does not the mixing patients who are outrageously mad with those who are quietly so, retard or lessen the probability of cure of the latter?—I have no experience of the treatment of insane persons collected together in numbers. My practice has been limited to individuals in private houses.

Can you say, whether in many cases of insanity, employment and occupation are not extremely likely to promote a cure?—Where the patient is quiet and well enough to be induced to employ himself, it contributes to his recovery.

Both bodily and mental?—Yes; but it is not easy to prevail upon an insane person to occupy himself with such employment or amusement as you may set before him.

Would the attendance of one physician upon such a number as 100 patients be sufficient, in case of his giving up his whole time to it?—Perhaps it might. But I should think it better to have two three or even four physicians, to attend such a number of patients, and not to limit their attendance to this collection of patients.

Do you think any inconvenience would arise from the attendance of two physicians on a county asylum or county hospital for insane persons, the same as upon hospitals for other disorders?—None; but, on the other hand, great convenience, for besides the advantage of consultation in difficult cases, it would preclude that mystery in future in the treatment of insanity, which without having been of any service to the patients, has been the means of withholding from the profession at large, much valuable information on the nature of this disease.

Would it not be a great advantage to the patients, as well as facilitate the attainment of information with regard to the nature of the disease, to have two or more physicians attend one asylum for the reception of lunatics?—I have answered this question, I believe, already.

In institutions where there are 50 or 100 patients of this sort, is it not absolutely necessary for their benefit that there should be a resident surgeon and apothecary?—I think it is absolutely necessary; for disorders of this description often demand instant attention and assistance.

And that his attendance should be confined to that institution?—Certainly.

Is it your opinion, that seclusion and restriction from the visitation of those places, is prejudicial to the patients, or necessary to be adopted?—A discreet visitation of these houses for the reception of insane patients, may be useful and proper; but it must be discreet.

Are you of opinion, that in every case of incipient insanity, the advice of a physician is most important?—I should think the advice of a physician, if it can be had, always important and useful in the beginning of insanity.

Mr. Matthew Talbot called, in and Examined.

*Mr.
Matthew Talbot.*

WHAT is your situation?—I have the care and management of the White House, Bethnal-Green, for Mr. Warburton.

As a partner in that house?—No, not as a partner; Mr. Warburton has that confidence in me, that he allows me to join my name to his; I am not a partner, there is no written agreement for my being a partner; I am not a partner in law; I have a salary, not a certain portion of the profits.

You appear to the world as if you were a partner?—I do.

The superintendence of the house is principally under your care?—It rests wholly upon me, the paying and the receiving.

Having the care of the house, have you daily attended and gone through it, to see that the patients are properly treated?—Certainly; on some occasions I have been obliged to go out so early in the morning, that it has been impossible for me, and perhaps I have been out the whole of the day, and have not had an opportunity for one day.

How often has that happened?—It may not have happened once in six months.

Have you, in the course of those visits, found instances of keepers who have treated the patients cruelly or harshly?—No.

In no instance?—In no instance have I found that to be the case.

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Mr.

Matthew Talbot.

No instance where a patient has been treated with hardship or cruelty?—Excepting in one.

What was that?—That was what we called our head-keeper; a person was in confinement, in the waistcoat, and he bit the keeper in the hand, and the keeper hit him a blow on the head; that I saw myself.

That is the only instance you know of?—Yes.

What was the name of that keeper?—Rambard.

How long have you had the care of this house?—I have been about fourteen years in the situation I now hold.

If you have seen no instances of cruelty in the keepers, you have not been obliged to discharge them?—This keeper was discharged as soon as I could provide a successor.

How soon had you an opportunity of replacing that keeper?—I cannot speak in point of time; but I dare say it was two months at least, if not more.

In what year was it?—I do not recollect the year.

Do you recollect a keeper of the name of Ramsbotham ill-treating a Captain Dickinson?—We never had one of that name, it must mean Rambard.

Who was the person he struck?—Captain Dickinson; that is the person who was discharged, as I have just mentioned.

Did Captain Dickinson die soon after this blow?—No, he lived a long time; I was with Mr. Rogers at the time that which I have related passed.

Do you happen to know of what complaint Captain Dickinson died?—I do not know what his complaint was, but he was under the constant irritation of high disease; he was constantly under the care of Mr. Rogers and Mr. Dunston.

Do you recollect a complaint having been made by Mrs. Humieres, of the ill-treatment of Mr. Driver, a respectable farmer?—We had a Mrs. Humieres, the sister of Mr. Rogers.

Did she make any complaint to you of the ill-treatment of a Mr. Driver?—No.

Did you ever make a complaint to her of the ill-treatment of Mr. Driver, of his having died in the act of forcing?—It is no such thing; no person ever, to my knowledge, died in the act of forcing in our house.

Did you ever hear of Mr. Driver being beat?—No, never; and I am certain it was not so.

You do not know of his being struck with a pair of boots?—No.

You do not know of Mr. Driver having been beaten with a pair of boots?—No, I never heard any thing on the subject.

Do you know of what Mr. Driver died?—No, I do not know that he died at all in the house.

How long ago is it?—Indeed I cannot tell.

How long is it since he was in your house?—Indeed I cannot tell. I have had five thousand patients in that house since I came there, and I cannot remember their names.

Do you keep a register of the names of patients when they come in and go out?—Yes.

And whether they are cured?—No, we do not register that; only when they come in, and when they go out.

Was this Rambard your principal keeper?—Yes, he was.

Had you ever any complaints of his ill-treatment of the patients?—No.

And you know nothing of his having ill-treated them, except in the instance of which you were a personal witness?—No.

Did Mr. Rogers ever complain to you of the ill-treatment of the patients, by Rambard?—Never in his life.

How long did he live with you?—I should think it was four or five years, as far as my memory serves.

Did you never hear of a particular instance of his cruelty, in thrusting a wooden spoon into the mouth of a patient?—No, not a wooden spoon. I will try to put you to rights; you mean, where the roof of the mouth was hurt.

The question is, Whether you had ever a complaint against Rambard, for injuring a gentleman most seriously, by thrusting a spoon into his mouth.—No, I had no complaint. I was by at the time the action was done.

Who did it?—The same person you have mentioned.

Describe what happened.—The patient had been in our house, I think, about a week or ten days; he was in a very high state of disorder; his disorder was so high they could not shave him. I was complaining of his not being shaved, and this man said it was impossible. I said, "I will stand by while you do it." He was confined in a waistcoat only, that the waistcoat-strings were confined to the chair-back,

Mr.
Matthew Talbot.

chair-back, to keep him as little in action as possible. While he was shaved the keeper was lathering him with the shaving-brush; and in doing that the man opened his mouth, and swallowed the brush into his throat. The keeper was very much alarmed; the man must have been dead, for he endeavoured to swallow; and he took hold of the handle of a pewter spoon; and, by endeavouring to open his teeth with the spoon, he hurt his mouth. That was the fact; by that the man was injured, and it was impossible to avoid it; the man must have lost his life in two minutes, if it had not been taken out of his mouth.

Was he injured much by the operation?—I cannot tell, for he was under the care of Mr. Rogers and Mr. Dunston. Mr. Rogers can explain the extent of injury, but so far from any blame attaching to the man, the patient must have died in two minutes, if he had not done it.

What is the ordinary expedient for opening the mouth?—That depends upon circumstances; we generally make use of the handle of a spoon, and if we can get our finger into the mouth, we put our finger on the end of the gum, that by the pressure of the finger gives a painful sensation to the gum, and that will sometimes cause them to open their mouths, and if it does not, we are obliged to use the best means we can to get their mouth open; but that neither implies intended violence to the patient nor any thing of the kind, for if they will not eat, of course they must die.

Have you any particular instrument by which you open their mouth?—It depends upon circumstances; we generally feed them with a spoon, and if it is not of that length to carry it over the tongue, so as to keep the tongue down, it will be blown out into your face.

Did ever an instance occur of a patient dying under the operation of having his mouth forced open?—Never in our house.

Will you take upon yourself to say, that in your house, since you have known it, there never was an instance of a person dying in consequence of forcing him to take food?—I am ready to take my oath upon that at any time.

Do you recollect a gentleman in the room over your usual sitting-room, who died while being forced by Rambard, and who called loudly for assistance, which you and your wife distinctly and separately heard, but did not attend to it?—That is a downright infamous falsehood.

That never happened?—No, it did not.

Do you recollect the wife of Mr. Hodges, vestry clerk of St. Andrew's, Holborn, dying under the hand of Mrs. Seal, while in the act of being forced to take food?—We had no person of that name in the house; we never had a person of that name in the house. I think I can put you to rights upon that. I am trying to recollect the circumstance:—it was not the wife of the vestry clerk of St. Andrew's, Holborn, but to the best of my recollection, one of the beadles belonging to the parish, and I remember the circumstance; it occurs to my mind. So far from being forced, she was brought into our house the day before; she died in the act, not of forcing, but only with a person feeding her with a spoon, as you would a child.

Without any force?—Yes.

She took her food without reluctance?—I remember the circumstance, her name was Hodges, she was only in the act of feeding, the same as a mother her child, and she dropped off her chair; there was no force or confinement whatever.

It was a sudden death?—Yes.

Was there any jury sat upon her?—No; we do not conceive any necessity for that.

In no case whatever have you had a jury summoned?—Yes, always in case of an accident.

How happened it that there was not in that case?—It was considered and understood by the whole of them, that she was exhausted before she came, by the height of her disease, and that there was no possibility of our doing her any good.

No coroner's jury took place?—No; there was none. I do not recollect the circumstance of her dying immediately, but I believe that was the case; but there was no blame thought imputable to any body in that case; there was no confinement or force, I am positive.

To what did you attribute her sudden death?—To her being exhausted by the disease, before she came into the house; many are brought into the house who do not live above a day or two.

Who was feeding her at that time?—The servant who had the care of the room.

What was the name of that servant?—I do not know.

Is Mary Seal living with you now?—No, there was a Mary Seal lived with us.

What did you part with her for?—I forget what it was, but I believe it was some altercation about a patient; I cannot recollect at this distance of time.

What

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What medical man had attended this woman before she came to you?—As it was the wife of one of the beadles of St. Andrew's, I should suppose it was Mr. Taylor, the parish doctor.

Had you a female keeper of the name of Betty Welch?—Yes, we had.

Do you recollect hearing of any cruel treatment of her's, of a Mrs. Elliot?—Yes.

What was the nature of that?—It was not from Betty Welch that the treatment arose; she was in a very high state of disease, she was confined in a waistcoat, or what we term a crib, and by the violence of the patient in getting her up she had a fall against the crib, in the act of confining her in the waistcoat, but no violence was committed by the servant who had the care of her; accidents of that sort will occur in confining a patient, without any bad intent on the part of the keeper or keepers.

Was not Mrs. Elliot removed from your care in consequence of that?—I believe she was.

Was any complaint of it made to Mr. Warburton?—Yes, there was.

Was there any inquiry by Mr. Warburton in consequence of that?—Certainly, there was.

What was the result of that?—It was stated simply how it was, that the girl was not to blame, for that very patient came to our house full of bruises, and in a terrible state. If we had thought the girl to blame, I should soon have sent her out of the house.

How long did Betty Welch remain with you?—I think she was with us for seven years, or six years, I have no doubt.

Do you recollect striking a pauper patient in the hall yourself, by which he lost the sight of one eye?—No, no such thing ever happened.

Had you a keeper of the name of Dalby?—Yes.

Was any complaint ever made to you, of his having flogged a pauper patient of the name of Rogers with a bed-cord, assisted by a man of the name of French?—No, never in my life.

Did you ever hear of Rogers being flogged at all?—Never, neither do I believe it.

Did Rogers die in your house?—I believe he went home; but really it is so distant a time, unless there is some particular circumstance attached to the patient I cannot recollect; I think he went home.

Do you recollect a pauper patient in the hall killing another by a blow with a stick?—No.

Are any of the gentlemen in your house confined with the pauper patients?—No.

Is not Captain Hay confined among the pauper patients?—We have no person of that name; we had a Captain Hay, but he has been dead these two years; but he was not with the parish patients, he was on our gentleman's side, in what we call our warming-room.

What is the size of that warming-room?—I am sure I do not know.

What should you think is the size of it?—I am sure I do not know; I should suppose about this size (about ten or eleven feet square). We keep three or four refractory patients there away from the others.

Do you know how long he was confined in Whitmore House before he was sent to you?—I do not know that; since I have been at the Green I have had enough to do there without knowing about other houses; I know he came from Hoxton House to our house, but I know nothing of the circumstance of his confinement there.

Was a gentleman of the name of Halston, paymaster of a regiment of horse, confined a long time in your house?—Yes, he was.

When he was first sent to you, did you not allow him to go out whenever he chose, under the idea, that from the length of time you had known him, he would conduct himself with propriety and return at the time you desired him?—He never went out of the house but once, and that was with a keeper with him, to buy a pair of spectacles; he was committed from Newgate; he was tried under the maiming act of Lord Ellenborough, and I once had the care of him at Hoxton House, when I was a keeper there, and before I came to the Green I had the care of him as a private gentleman down at Dulwich, and he made his friends promise me, that if ever he was deranged again he should come to the place where I was, which they fulfilled, giving security to the Secretary of State; and he never went out but once, and that to buy a pair of spectacles in St. Paul's Church Yard, on account of the way in which I had him, or I should have trusted him out.

Did he conduct himself quietly in your house?—No, he was a very irritable patient indeed.

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Was not he in the habit of going out and conducting any little business for the house, seven years before, when he was confined at Whitmore House?—Yes, at Whitmore House he did.

Had you ever occasion to confine him by means of a waistcoat or irons at your house?—He was confined in a waistcoat, but not irons.

Why did you confine him to your house entirely, and prevent his having liberty as before?—It was on account of the order of the Secretary of State, being tried under that act.

Do you know any thing of ill-will of Mr. Dunston towards him that occasioned a different treatment?—No, not the least in the world; Mr. Dunston was a kind friend to him, and allowed him every indulgence when he was in that house; but he was of that vindictive malicious mind, that when his disease was upon him he would say any thing; he was indebted to me twenty pounds when he died, that I had lent him from time to time when he was in my house, in consequence of the former friendship there was between us, when I had the care of him as an individual keeper at Hoxton House.

Did the commissioners visit your house regularly?—Yes.

How often?—I do not think within the last twelvemonth they have visited us above twice.

When they did visit, did they go into every room and every part of your house?—Not the last time; I think it was in December, the days were so short, they went as far round as they could go, and by candle-light; they were in the house so late that they did not go into every room.

They did not desire to go into every room?—No.

What time did they spend in your house?—Perhaps an hour and a half.

Did they see the poor men's straw-room, which was formerly a slaughterhouse?—Yes, they have seen that.

Did they see that the last visit?—Yes.

They walked into that, though they did not go into some better rooms?—They looked more among the poor patients than they did amongst the private patients.

They examined the state of the poor patients in that straw-room?—Yes, they did.

How many persons are there in that room now?—I do not know what room you mean.

The place which was a slaughter-house?—I think there are five; that is the place where our dangerous patients lie.

Sleeping on straw in cribs?—Yes.

Did they see the hog-sty where a female patient named Isabella Adams, was confined?—A hog-sty! I wish all the gentlemen would come and see all my house round, we have no hog-sty for a patient.

Have you a place now used as a bed-room that ever has been used as a hog-sty?—No, certainly not.

You say the commissioners passed an hour and a half with you last December?—Yes.

Did they see all the patients?—Not all of them that time.

How many patients had you at that time?—I cannot say.

Had you two hundred?—Yes; our house has been lowering ever since Bedlam has been opened; but I dare say, we had three hundred and fifty at that time.

Is there any room in your house known by the name of Bella's Hole?—No.

Was there not a woman called Isabella Adams confined in a small square place?—Yes, there was.

Describe the size of that place, and the nature of it?—Really I cannot say; but I should suppose it must be seven or eight feet long, by three or four feet wide; that was a room that Bella Adams used to be put in frequently.

Was it long enough for her to stretch herself out at full length?—I am sure it is more than six feet long.

How high is it?—I dare say it is nine feet high, if not more.

In what manner was it lighted?—It was lighted by the door and the bricks taken out of the wall; it was only for a dangerous patient, as a temporary matter to keep them for a while.

Was there a glass put in where a brick was taken out?—No.

How long has she been there at a time?—She has been confined there I dare say, two days together.

And nights?—Yes.

Was

Was she on straw in a crib?—No, she had straw put in not with a crib.

Was the floor wood?—Yes, wood; it was made on purpose, and the planks it was made with were the full thickness of a deal.

Was the place made on purpose for her?—Yes.

Was she chained there?—No; we could not make her secure in any other way; she got out of the house, over the roof and the ridges.

What is below the room?—There is nothing below it; all our house is on a level.

What is above this room?—There are the sleeping-rooms above that; it is under the body of the house.

In what season of the year was she so confined?—I am sure I cannot answer that; whenever she was refractory, sometimes she would go on for three or four months together, and then she would tear and destroy every thing.

Winter or summer you kept her there;—No; in the winter we used to keep her in the gallery, and put a wrist-lock on each wrist, and a leg lock; and when she has escaped, we have been blamed by the gentlemen of Saint George's, for not keeping her; but it pleased God at last to take her, and she died at Saint George's.

She was never confined there in the winter?—Not that I know of; I do not believe it was the case, for it would not be permitted.

Does the same room still exist?—Yes.

Was there a patient of the name of Green confined there?—Yes; he was a casualty patient on the county of Essex; he was put into it.

How long was he confined there?—I dare say he was there a week at a time, if not more.

That depended upon the length of the paroxysms?—Oh, yes; he was such a dangerous patient.

If a paroxysm lasted a month, was he still kept there a month?—No; he was taken out and confined by handcuffs, with a slight chain down to the leg-locks so as to walk about and have circulation.

Why was he confined in this small chamber if you could so confine him?—We were obliged to do that for security during the night; we could never keep him but there in the night; it was made strong, so that the patient put in need not be chained; it was made of strong planks; it has never been occupied since by any patient; and any persons who see the place, will see the devastation he has made on those strong deal planks.

If either Isabella Adams or Green were confined there during the winter, do you not think they must have suffered most severely from cold?—No, they were never confined so as to suffer any thing from the cold.

Can you take upon yourself to say, that none of the pauper patients in your house ever suffered from the severity of the winter from cold?—No; I do not know of any except one, where that can have ever happened in our house, that was some years ago; I believe the cold did affect the toes of one patient, but that we are extremely cautious about; as soon as the winter comes on, Mrs. Talbot makes flannels to tie round their legs when they go to bed at night.

Do you recollect what parish that pauper belonged to who suffered in her toes?—No I do not; it was a great many years ago, and I believe Mr. Rogers or Mr. Dunston had the care of her at the time.

Where do your pauper patients principally sleep?—Above stairs; we have at this present moment on the ground floor twelve female patients; and that is in the building near the side where the poor women used to be; there are six cribs in each room.

As pauper patients?—Yes; the most dangerous of the women patients.

Do they sleep in straw?—Yes.

And have they coverlids?—Yes.

Is that a stone floor?—No; a wooden floor.

Are they chained to their cribs?—I dare say six of the twelve are confined.

How are the rooms lighted?—They are lighted by glass; but now since the late improvement we have windows on both sides, so that there is a thorough circulation of the air; before it was only one way.

By what means are those patients kept warm during the winter nights?—By keeping those things on; many of them will kick off every thing; it is impossible to answer that you will find their things on in the morning.

Will you take upon yourself to say, that none of your pauper patients during the winter ever suffer from the severity of cold?—It never occurred but in the instance I mentioned, which was some years ago.

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Have those females patients each a single crib?—Yes.

Do your male pauper patients sleep in single beds?—Every one.

And have always slept singly?—I cannot say they always have, but they do now.

Have they always done it since you have known the house?—They have not.

How long has that been the case?—Ever since I have known the house we never had but eight or ten beds of that description; it became matter of necessity for a time, but that has been removed nearly this twelvemonth, I dare say.

No patients have slept two in a bed during the last twelvemonth in your house?—I think I can take upon myself to say that.

Prior to that some of them did?—Yes, some few of them.

Have you what are called double cribs?—No; I suppose we might have eight or ten beds of that description; it was always felt very offensive; but now every male patient sleeps singly.

Are the sleeping-rooms of those pauper patients damp?—No.

Are not the floors very much impregnated with urine?—I believe there is only one room that you will see any thing of the kind in.

Stained red?—Yes; I do not suppose you will see more than the width of this table in any room in this house.

During the winter, in those rooms where they have no means of drying them, what means have they of carrying off the damp and the urine?—During the frosty weather we only just take up where the urine may be, we do not wet the floors.

The floors are wet already?—No, not generally wet.

Are not the floors of those rooms where the pauper patients sleep, generally found covered with urine every morning?—No; the cribs stand on the side of the rooms on brick; the middle of the floors are boards, where the patients stand in frosty weather; we only let them touch where the urine may be, but which is upon the bricks; all the upper rooms are done every day, because they soon dry.

When the patients wet the straw and blankets, how often is the straw and the blankets changed?—The straw is taken out every day.

Is fresh replaced every day?—Fresh straw is replaced in the room of that which is wet, and there is a drying room where the blankets are taken; there is a fresh succession to supply to-night what may have been used last night.

So that the blanket which is wetted to night is not used to-morrow night?—No, not till the next night comes.

To-night being Tuesday, a blanket used last night, Monday, will not be used till Wednesday night?—Just so.

You have a double set?—Yes.

Have you a greater number of beds in your houses than you have of patients?—I suppose at this moment we have not got less than sixteen beds unoccupied.

What may be the size of your present family?—I think now we must have 300, or from that to 360; last Friday we had three went away, and we had six came in the same day; we change so, that I cannot speak to the number any day without taking an account; we have had an influx lately, or we were lowering very fast.

How often does Mr. Warburton go round your house?—I think I may say with safety, upon the average, twice a week; but I am inclined to think more.

He examines every person and every room?—He goes all round the house.

How often does Mr. Dunston, the apothecary, go round the house?—Mr. Dunston does not come so often, but his assistant comes every day; but if there is any particular case appearing to require his superior judgment, he comes every day.

How often has he been round the house within the last month?—I should think three or four times, but I really cannot say.

Can he have been there at any time without your knowing it?—Oh, yes; that is possible, for I am obliged to be out on business.

You have said that if an accident happens in your house, either by one patient killing another, or by any accidental death, a jury is always summoned?—Yes.

Has a jury been oftener summoned in your house?—We have had only three cases since I have been there, and we have had a jury three times.

In what number of years?—Fourteen years.

Who summons the jury, the coroner?—Yes.

Of what class of persons are they principally composed?—Tradespeople, such as our neighbourhood affords.

Tradespeople

Tradespeople taken in the vicinity?—Yes; we have had but three cases in fourteen years.

When a patient dies do you make a point of informing the person who sent him to you of his death?—Yes; if it is from a parish we write to the parish officers; if the patients friends leave their address, we write to them.

Do you say any thing more than that the patient is dead?—Not if they are under any medical treatment; if it is from the parish of Marylebone, where there are medical attendants, I only report them dead, and then they look to the parish attendant for information; but if it is a private patient, where there is no medical attendance, we send word of the cause of their death.

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Mercurii, 28^o die Februarii, 1816.

The Right Honourable GEORGE ROSE in The Chair.

Mr. *Matthew Talbot* again called in, made the following Statement.

I WISH to explain a part of the evidence I gave yesterday, in reference to the visitation by the College of Physicians: I stated, that on the last visitation they inspected the lower rooms; on recollection I am now convinced that they visited the upper rooms, but not the straw-rooms, and the bed rooms on the ground-floor.

You have informed the Committee, you have been fourteen years in the management of this house?—I shall have been next August.

Did you know a person of the name of Rogers, a medical man?—Yes, very well.

Was he in attendance upon your house for any part of that time?—Mr. Dunston commenced business in June 1812, and Mr. Rogers was his assistant, and attended our house in a regular way, with Mr. Dunston, I think for five years and a half, till the latter end of the year 1807.

Do you mean with Mr. Dunston personally, or as his assistant?—As his assistant.

In what character did Mr. Rogers attend?—He attended as an assistant to Mr. Dunston, who is a surgeon.

Did Mr. Rogers attend as a surgeon, or a compounder of medicines?—He attended as the apothecary.

And a surgeon combined?—No, he did not attend as a surgeon, but as an apothecary.

Was his attendance pretty regular upon the house?—The regular attendance is every other day, except any particular circumstances arise, and then every day.

Did he appear to manage the patients properly?—Yes, I do not know that there was any fault to find.

Did he himself make any complaint to you of the treatment of any of those patients?—Never during the whole time he was there.

When Mr. Warburton has been present with you, and Mr. Rogers has been by, did he ever complain to Mr. Warburton, of any improper treatment of the patients?—Never; if he had I should have been sure to have known it from Mr. Warburton; but it was just the reverse.

Do you recollect any particular periods when you have been obliged to send for Mr. Rogers or Mr. Dunston, in cases of great danger of the life of the patient?—No.

Did sudden deaths frequently happen?—Oh, no; I recollect there was a case where a woman had cut her throat with a small piece of tin; she was a dangerous patient, and had contrived to cut her throat with a piece of tin not longer than my thumb; we sent for him that night; she lived about a month, and we had a coroner's inquest upon her when she died.

You do not recollect any instance of sudden death having been the consequence of forcing a patient to take food?—Never; and I used to force a great many people at Hoxton.

Do you, during the course of your practice at the house, ever recollect any person dying under the operation of forcing?—I am positively certain no such thing ever happened.

You have at different times seen the medicines which have been sent in by Mr. Dunston or Mr. Rogers?—Mr. Rogers principally attended, and used to send in the medicines; it was according to his report as he went home, he had a full power to send what medicines he thought proper. I used to remonstrate against it,

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it, because we are careful not to add unnecessary expense to the friends; and the answer was, it was considered necessary, and that being by a medical man I could say no more about it.

Did you ever represent to Mr. Warburton that medicines were brought in, more than you thought necessary?—Frequently.

Inform the committee what Mr. Warburton's reply to that was?—When I have complained to him upon that subject, he has said, that Mr. Dunston was to send in what medicine he thought necessary and proper for the use of the house.

Was any thing said about the expense of the medicines?—For the medicines I can take upon myself to say, there has not a year elapsed that Mr. Warburton has not paid £.100 a-year, that never was paid by the friends; that has been paid out of the expenses of the house, and it has been nearly the same with wine and other things that we can make no charge for; the only parish we make a charge for is Saint Mary-le-bone, through Lord Robert Seymour; we were permitted to make a charge when there was a fever in the house.

You probably remember the first appearance of the typhus fever?—Yes, I do.

In consequence of finding one of the patients in a state of sickness, what did you do, did you send for the apothecary?—No; I mentioned it to Mr. Rogers, and he said he did not think it was, and he treated it in the ordinary course of things; and when Mr. Warburton came I stated to him my apprehension. The patient's name was Martha Wing.

Was Rogers present?—Not at that time; but I shewed Mr. Warburton the patient, and the moment he saw her, he said this is typhus, send for Mr. John Dunston; then we did all we could to separate the patients.

Are you speaking of the first typhus fever?—It was only once in our house.

When was this?—I think in May three years ago.

On what occasion was it the parish of Saint Mary-le-bone supplied you with wine?—At the time I am mentioning, and I believe we were allowed to charge to the parish £.35.; we had about eighty, and lost thirteen; and I believe there were seven or eight belonging to Mary-le-bone parish among the number.

Do you remember at the time of this typhus fever happening, any conversation between you and Warburton and Rogers, respecting the commencement of that disease in that single patient?—I know when Mr. Rogers came, he came along with Mr. Dunston, when he was sent for, and then the subject was started.

Did not he come first by himself?—He did.

What did he say?—He considered it as an ordinary common thing, not as a contagious disease.

How came you to send for Mr. Dunston?—In consequence of Mr. Warburton saying it was typhus.

Did Mr. Warburton complain to Mr. Rogers, that he had mistaken the case?—Yes, and blamed him very much, in consequence of what had happened in the other house the year before.

Is Mr. Rogers a surgeon?—No, I never understood he was; I understand he is an apothecary.

Do you know whether he belongs to the Surgeons College?—I do not; he always used to sign certificates as an apothecary.

You say that Mr. Warburton gives you leave to add your name to his?—Yes, and I give receipts for both.

Are you aware of the consequences of that?—I do not know; I should think Mr. Warburton was in a worse situation than me, if I was to act dishonestly.

Do you know any thing of any quarrel in your presence between Dunston and Rogers?—No, I cannot say I do, any particular quarrel.

No ill-will?—No, I do not believe there is any thing of that.

Have you ever heard Rogers express himself strongly about young Mr. Dunston?—Mr. Rogers, I should tell you, left Mr. Dunston and went to sea with a Baron Hompesch, or some such name, and I believe he was gone about two years.

Do you know for what purpose?—In privateering, I understood.

As a surgeon?—He went in a medical capacity; on his return he was out of employ, and he applied to me to get him reinstated with Mr. Dunston. Mr. Dunston would not see him personally, and I was the middle-man between them; when things were arranged then Mr. Dunston saw him; he was to have so much the first year, I think it was £.60, or £.70, and to go on in gradation £.10 a year, till such time as the partnership expired between Longley and Dunston, and then after that expired, he was to become a partner.

In point of fact, did the partnership take place?—No.

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In consequence of that, did Rogers express himself with any degree of severity towards Dunston?—When they could not agree, and a separation had taken place, I have heard Mr. Rogers often say he ought to be shot, and he should not mind shooting him; but I only considered it arose from a disappointed man, from irritation and disappointment, and no more unfavourable to Mr. Rogers than that, not from any intention of doing him an injury.

Was Rogers in good circumstances?—No; he owed me £.30 when he left Mr. Dunston the first time, that I had lent him at different times, having a good opinion of him.

You remember your housekeeper, Mrs. Humieres?—Yes, she was his sister, when he was reinstated with Mr. Dunston, Mrs. Talbot wanted an assistant, and he applied to Mrs. Talbot for the situation for her.

How long did she stay with you?—About three years; but she was in such a situation, having two children in a parish workhouse in the country, and another to support, she could not be introduced into our house till I lent Mr. Rogers money to clothe her, that she might not appear in a degraded state in our house, and before she had been with us six months she was £.30 in advance, from persons coming after her for money; she went on for two years very well. Mrs. Talbot became ill, and she had the charge of the keys, and as she improved in clothes, and so on, she hurt Mrs. Talbot's feelings. Mrs. Talbot was obliged by ill health to remove to this end of the town, and when I asked her a question, she got so haughty I could get no answer; and when Mrs. Talbot returned, it was determined she should be removed, and that took place the day after Mrs. Talbot's return.

Though you knew she was in arrear with different persons, you made her your confidential housekeeper?—Certainly, it was Mr. Rogers's recommendation, and we placed confidence in her, and she went on very well for a time.

How came you to part with her?—Because she behaved ill to Mrs. Talbot before she went away. I should have parted with her sooner, but that I could not do without her till Mrs. Talbot's return.

Was there any other reason?—Yes, Mr. Rogers and his wife lived too near to us; we did not find any thing come from Mr. Rogers's to our house, but we found things go from our house to theirs. Mrs. Humieres daughter used to live with Mr. Rogers's wife at a little distance from our house, and when I was out of the way the servants can prove things were carried out of the house, but it was not ascertained to what amount, till Mrs. Talbot was able to look into her own store-rooms, then she found things that could not be accounted for, nor have been made use of in the house; those were the two reasons.

Did you institute any prosecution against Mrs. Humieres for this supposed purloining or breach of trust?—No, not at all.

In the confidential situation she was in, did she make out Mrs. Talbot's bills?—Oh, no; Mrs. Talbot had nothing to do with bills.

Did she make out your bills?—Oh, no; nobody had any thing to do with bills, but me.

Her bills to you for the common expenses of the house?—Oh, no; she had nothing to pay.

Do you mean to say positively that Mrs. Talbot never made any bills out to any of the patients friends?—No, not bills relating to the house.

Not house bills, but any bills for expenses for the pauper patients?—In this sort of way, perhaps a person may pay a shilling a week or eighteen-pence a week, for any little matter of that kind, but nothing more than that.

For clothing?—Oh, no.

You are positive of that?—Never.

If you were to see a bill drawn out in Mrs. Humieres hand-writing, would you know it again?—I do not know whether I should or not.

You would know Mrs. Humieres, if you were to see her?—Yes, certainly.

State exactly the firm of Mr. Warburton's house?—In my receipts I always sign for Warburton and Talbot, and the bills are headed as such, Warburton and Talbot.

[The Bill delivered in by Mr. Rogers was shewn to Mr. Talbot.]

Have you seen Mrs. Humieres write often?—I have, but I cannot say whether this is her hand-writing or not.

Will you say it is not her hand-writing?—I am more inclined to think it is not than that it is, as I do not think she could write so well. I think it was our laundry-maid's writing.

What was her name?—Her name was Sarah Marsden; it is more like her hand.

Mr.
Matthew Talbot.

Is she in your house now?—No.

Do you know where she is now?—I do not; I enquired in consequence of questions put yesterday respecting the woman who fell off her chair, and the person that was feeding her, I understand is married and gone down into Essex.

Do you know much of the practice of St. Luke's?—No I do not; I never was over it but once in my life.

Does not Mr. Dunston of St. Luke's recommend patients to your house?—Yes, and he did I suppose for these thirty years past in Mr. Stratton's time.

Have patients been sent to your house with limbs contracted, from what you should suppose improper confinement?—That might probably be the case, and not from improper confinement; some of the patients are in the habit of lying in such positions and situations, as for their limbs to be contracted without improper treatment.

You do not know the practice of St. Luke's in that respect?—I do not.

Do you recollect when a Mrs. Rhodes was at your house, visiting her husband, that Mr. Ford waited at the outside of the gate, for the purpose of communicating to her the ill-treatment Captain Rhodes received while he was confined in St. Luke's?—I remember Mr. Ford being at our house, but whether any such thing took place I cannot say; I do not recollect his waiting outside the gate to communicate any such fact.

Did you ever hear Mr. Ford say any thing respecting Mr. Dunston?—He was disappointed in his expectation; the gentlemen at St. Luke's wished Mr. Dunston to appoint some person to be in readiness, if any thing should happen to him, and it so happened, that Mr. Ford was not considered eligible, and he felt himself disappointed, and I believe attributed it to Mr. Dunston; that is all I know about it.

Did you ever hear him say why he left St. Luke's?—No, I believe it was by order of the committee that they gave him some remuneration for his trouble.

When patients come to your house from St. Luke's, did you ever observe that the marks of the linen were cut off?—Indeed I cannot answer that question; we keep a linen room for the purpose, and Mrs. Talbot, I am sure, would be able to answer any questions on that subject.

When Mr. Dunston sends patients to you, does he sign the certificate with his name or his initials?—Only with his initials.

How does that happen?—It is always signed by a medical gentleman besides, Mr. Dunston is only to indicate to me where it comes from.

When Mr. Dunston sends patients to you, you stated that the certificate is signed only with his initials; is that accompanied by another certificate from a medical person?—There is written by whose order the patient comes, and a friend signs the name under that; under that follows the signature of the medical gentleman; that makes it complete; then on this corner of the certificate there are the initials of Mr. Dunston; the name of the medical person is signed on the same paper.

How often is Mr. Warburton in the habit of going round your house?—To a certainty I can say, unless he should happen to be in the country, twice a week; but I may say more than twice a week, and I am certain more; but I would not go too far in my answer, and therefore I confine myself.

How often has Mr. Dunston the apothecary visited your house?—It depends upon the circumstances of the case, sometimes he comes two or three times a week.

As you have a number of patients, should not the attention of the apothecary be constant?—Mr. Dunston's partner that is now, attends regularly.

How often does Mr. Dunston the apothecary attend?—I cannot state the number of times; sometimes he comes when I am out, and there is no notice taken of those things. I should think I may safely say twice a week.

Is the medical treatment of the patients in your house conducted by Mr. Dunston generally, or by assistants of his?—It is conducted by his assistant, but he and his assistant consult together before the medicines are mixed up, and he attends twice a week.

The general attendance falls upon his assistant?—Yes, certainly.

What is the name of his assistant?—He has become a partner now; his name is Salmon; it is Dunston and Salmon.

If a patient should die in your house in the act of being forced, or from suicide, could that happen without your being informed of it?—Certainly not, if the least accident was to occur, I should know it in an instant.

In every such case is a coroner's jury summoned?—Yes.

If

If a person died from being forced to take food?—Such a thing has never happened in our house.

Whenever any death has happened, either from suicide or from any act of violence of any kind, the jury is summoned?—Yes.

In summoning the jury, is there any attention paid to procuring the tradesmen who serve the house to serve upon the jury, in order to prevent publicity?—It depends upon the summoning officer, we have nothing to do with that.

Has that happened in point of fact?—It is among our neighbours that they are appointed.

And among persons serving the house?—Possibly that may have been the case.

The question is, whether it has happened in point of fact?—The jury has been summoned out of the neighbourhood.

Who is the summoning officer?—I believe it is put into the hands of the beadle of the parish, generally.

Who is the summoning officer; whom do you send to when a death takes place?—I go to the coroner myself.

And who do you believe summons the jury?—I believe the beadle of the parish.

By order of the coroner?—Yes; when I have stated the circumstance to the coroner I have nothing more to do with it.

Whenever a patient dies, do you always see the body?—Yes.

And you yourself examine particularly, whether there is reason to suppose he dies from ill-treatment?—I see the patient so constantly that I always know the state of the house how they are.

In cases of summoning the jury, have you, or any body connected with your house, ever suggested the names of persons who should be summoned?—No, I do not recollect any circumstance of the kind; it rests with the person who summons them; I cannot tell any thing about that.

You must know whether you did ever suggest to a summoning officer, the names of any of your neighbours?—I do not know whether I have ever or not.

You cannot say that you did not?—I do not know that I have.

Do you believe that you have not?—I believe that I have not; I do not know that I have; I think I can positively say I have not.

Has any body, connected with the house, done so to your knowledge?—No, there was nobody in our house but myself; it is a thing I always have to do myself.

Do you recollect a young lady of the name of ——— in your house?—Yes, I do.

Do you remember the cause of her removal from St. Luke's to your house?—No.

You did not know that she was pregnant?—No, I did not.

Did she come from St. Luke's to your house, or go from your house to St. Luke's?—Neither the one nor the other; she never came to our house from St. Luke's, she came from her own home to our house; unfortunately we have had a good many of the family, her mother died in our house.

Do you know that she was pregnant while she was in your house?—No, I do not.

Who is the beadle of your parish?—I am sure I do not know his name.

Did any conversation ever pass between you and the beadle, on the subject of the coroner's jury?—No, never.

If you do not know the beadle, how can you answer for no conversation having passed?—I know the man's name very well, his name is Harrold.

Is he employed by you as a tradesman?—No, he is not in trade.

Was he ever employed by you?—No, it is some years ago since we had any accident of that sort.

Do you know Mr. Ford?—Yes.

Did you ever hear Mr. Ford give any opinion of the character of Mr. Dunston?—I know he used to speak very highly of Mr. Dunston, and used to send him a good deal of game and presents; but when he was disappointed of his situation, of course he changed his tone.

Do you know how long Mr. Ford was at the hospital?—I do not.

Was Mr. Rogers under the controul or influence of Mr. Dunston, so as to have prevented his making any representation of any improper proceeding he was witness to?—Oh, no; not the least in the world, I am convinced of that.

Mr.
Matthew Talbot.

He was quite independent of him?—Yes, quite independent; and I myself was very partial to Mr. Rogers; so much confidence had I in Mr. Rogers, that to serve him when he was disappointed in not being a partner with Mr. Dunston, I gave him my word, that in case he was disappointed, that if he went into business for himself, I would assist him; when the disappointment took place Mr. Rogers claimed my promise; and though I did not at that moment think so well of Mr. Rogers as I had done before, because I had given him my word, I did, for I felt as much regard for my word as any honourable member of this committee—[*The witness put in a bond for £. 500.*—To save me the expense of my attorney's drawing out the bond, he said, a friend of mine will draw it up for nothing, and he has given me a bond that is not worth two-pence; there is the bond, and the stamp is not worth two-pence; there is Mr. Rogers's own writing as to the different times when it is received.

You have received the £. 500.?—No, not a farthing; that which is written, is the different times the money was advanced by me to him; he has since that refused to pay me because the stamp was good for nothing, and in consequence of that I put it into the hands of my attorney. I did not know it was good for nothing till that.

You have informed the Committee, that your immediate neighbours serve on the coroners juries held at your house, and amongst them sometimes there may be some of your own tradesmen; do the same people always or frequently serve upon those juries?—No; I think the last circumstance that happened was five or six years ago; there have been but three during the time I have had charge of the house.

How long did Mr. Rogers attend your house?—I think it was five years and a half the first time, and I think from January 1810 to December 1812, was the last.

For the whole of that time you were satisfied with him?—Yes, I think I was always satisfied with him.

You informed the committee that Rambard very ill-treated a patient in your presence, and that he was discharged in consequence of that act by you; can you now state, what time elapsed between the time of the offence and the time of the discharge, having referred to your books since yesterday?—I do not keep any books of servants coming and going; I pay their wages every quarter.

Do not you state the name of the person you pay?—No, I do not.

Have you no receipts for their wages?—No; I never had a receipt from a servant while I have been there.

You informed the committee yesterday that the people all lie singly, males as well as females?—No, I did not say the females did.

The men all lie singly?—Yes, they do.

How long has that been the practice of the house?—It has always been the practice, as far as we could do it; we never had above seven or eight double beds.

How long have the paupers all lain singly?—I believe for above a twelve-month.

Did any of the pauper patients ever lie singly till within this twelvemonth?—They all did, except that we had seven or eight double bedsteads, in which our men patients lay.

You have informed the committee, that Mr. Warburton goes round the house twice a week?—Yes.

He has a son in the business?—He has.

Are we to understand you to speak of Mr. Warburton senior, or of Mr. Warburton senior and Mr. Warburton junior?—I meant Mr. Warburton; Mr. Warburton's son goes round frequently; he is a doctor, now he has taken up his degree; I do not look upon his visitation as any thing; I spoke of the father.

The house you say is now attended by Mr. Salmon; is he a surgeon, or does he profess to be a surgeon and apothecary?—He professes to be a surgeon; he is on the College of Surgeons.

Can you give any further information than you did yesterday, respecting the state of the floors in your house?—I cannot.

Were not there two or three inches of water found by your maid-servants, and the persons who took charge of the bed-rooms till within this twelvemonth, which was absorbed by mops, and the boards so cleaned?—No, we do not make use of mops.

Were not the rooms too much crowded?—They were formerly, but they are not now.

Was not there a great quantity of urine on the floors at that time?—Yes, there was certainly.

You

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Mr.

Matthew Talbot.

You have spoken of a Mrs. Humieres who was a housekeeper with you; exclusive of the suspicions which you have mentioned to have fallen upon her, had you any reason to complain of her general conduct, and particularly towards the patients?—No.

Did you ever detect her in any falsehoods while she was with you in the house?—No; I do not know that she did.

Has any proof at any time appeared, that the things which were missing had been taken away by her, or by any other person employed by her?—We can prove that her daughter was repeatedly there; if I happened to be in the way she was pushed into another room, and we can prove that the things were carried away. While I was on a visit to Mrs. Talbot, which I used to be every Sunday, Mr. Rogers and all the family used to be visiting at our house, and they always went away before I got home, at ten o'clock at night.

Has any proof at any time appeared that the things which were missing, had been taken away by her, or by any other person employed by her?—No, only what I have stated; she had the keys of every thing; we can prove that her daughter carried them away.

When these things were missing, were they in the charge of Mrs. Humieres?—Certainly.

You did not prosecute her for carrying away these things?—No, we found fault with ourselves for not prosecuting her.

Do you mean to convey a suspicion, that Mr. Rogers and his family were at all implicated in the carrying away the goods belonging to the house, of which you have spoken?—I do not mean to insinuate any thing of the kind; I only meant to say, that they visited her in the way I have stated; I did not mean to insinuate, that they carried away any thing with them at that time.

Did you mean to imply any thing at all against them by the answer you gave?—No, not at all.

Then for what reason were their names brought in?—I only meant to say, that they were there at the times I was absent, not that they carried away any thing with them at those times.

Do you mean to insinuate that Mr. Rogers ever carried any thing away?—I do not mean to insinuate any thing improper against him.

To whom did the property belong which you could prove to be carried away by the daughter of Mrs. Humieres?—The stores of the house.

If you could prove that they were so carried away, for what reason did no further examination into the subject take place?—We did not think any thing more about it; she was gone, and we were perfectly satisfied, and there was nothing more said about it.

Do you mean then that you had no opportunity of proving it till after Mrs. Humieres was gone?—I do not mean to say that. I mean to say, that could have been done before, if we chose to do it.

Why did you not do it?—We did not give it any further consideration.

Did you think discharging her from her situation was sufficient punishment for her fault?—Certainly.

You say that a part of the house stores were embezzled; do you consider the parish clothing that is kept in your store-room as stores of the house?—No; we never have any spare clothing from the parishes; there is a change; there is a closet on purpose for them.

Are those clothes kept in the store-room?—Yes.

From those stores of the house which you describe to have been stolen, did the parishes sustain any loss?—No; it was what we call amongst the private patients.

Did not you keep them in the same store-room?—Yes; but there is a closet for the parish clothing, distinct from the other patients.

How long is it since this passed that you lost these stores?—I think it is three years ago since she left the house.

When a patient dies in your house, have you any apartment appropriated for the reception of the corpse?—We have for one night, but we never keep a body in the house, it is removed to our undertaker's; we write to the friends, and they either take the body away, or attend at the undertaker's.

Do you send them to the undertaker's before an inquest, if it is found necessary?—No; we cannot remove them till the inquest.

Then the body in that case may remain till beyond that time?—Of course till the jury have seen the body.

Have you a room especially appropriated for the keeping of a corpse?—We have.

Mr. *Thomas Dunston* called in, and Examined.

Mr.
Thomas Dunston.

WHAT is your situation?—Master of Saint Luke's Hospital.

Is it the custom at Saint Luke's Hospital to confine any description of patients on straw only?—They lie upon blankets and straw, the wet patients.

And in the winter for several months together?—While they lie wet, we find it the most convenient, the urine runs off better than from any thing else, and we can shift it so much the oftener.

Have you ever sent any patients out of Saint Luke's with limbs contracted, in consequence of their having been thus confined in straw beds?—I do not immediately recollect; we have had them contracted rather; we always contrive to walk them about and keep people to lead them. I do not recollect that we have had any so contracted, that they could not walk.

Have you had any instances in Saint Luke's of patients destroying themselves?—That has been the case, but very rarely.

In those cases has a coroner's jury been invariably summoned?—Yes, where that has been the case a jury has been summoned.

In every instance of suicide or sudden death, a coroner's jury has been summoned?—Yes; except they have died in a fit, and then their friends take them away.

Though that death may be entirely sudden?—Yes; if they die in a fit, that sometimes happens. I knew a man once die at his meals, there was no coroner's jury upon that, for it was deemed as a fit.

Has that fit ever been occasioned by the treatment?—Never, to my knowledge.

When the jury is summoned, as stated in cases of suicide, do you know how that jury is formed, whether by persons in the immediate neighbourhood, or serving the hospital with articles?—Not persons serving the hospital with articles; the constables summon the jury, and we never know who they will be till they come.

You never have interfered in the summoning of a jury?—Not in the least; we never knew who they were till they came.

Have you known instances of female patients being pregnant in the hospital?—We had one that was thought to be pregnant in the hospital; she was sent to me a good way up from the country; she came up in a broad-wheeled waggon, and it appeared that it was through the waggoner, as she came up; they laid it upon us, but the waggoner confessed it, and it turned out that she became so by the waggoner, as she came up.

Do you recollect a patient of the name of ——— being in Saint Luke's?—There was.

Was she pregnant while in the hospital?—She was, by one of the servants.

By which of the servants?—His name was Edward Dowding.

Was he dismissed for that offence?—He was.

Immediately?—I kept him a week or two to be certain. I was some time before I found it out, and then he was dismissed.

Do you know what became of him afterwards?—He now lives somewhere in Whitechapel, I believe; he married one of the servants after that.

He is not now connected with any house of reception?—None whatever, I believe.

What became of Miss ———?—She went to her father at Bethnal Green, I think.

Are you sure she did not go to Mr. Warburton's house?—I heard she was there several times.

Do you know whether she was there as a patient?—Yes, several times; but whether she went directly from me to that house I cannot tell; I thought they tried her at home first. I know they sent her there, but I thought it was not till afterwards. I think I heard that she lay in there afterwards.

At the time she became pregnant by this man, was she confined in irons, her legs and wrists both confined?—She was not at all confined.

In a former examination you stated, that the men had no access to the women's side, except in cases of refractory patients; how then came Dowding to have access to Miss ———?—They carry up the beer and the provisions with the maids, and they are sent for occasionally, as I observed before.

Do you happen to know why Miss ——— was confined; was she mad?—Yes, she certainly was a vicious kind of young woman.

You

You have stated, that the apothecary pays his visits daily through the hospital; did you not send him into the country after a patient who made his escape from the hospital, and was he not at that time absent for a fortnight?—I am not certain how long he was absent, but he did go after a patient, I think not at that time.

While he was absent, did he not leave the key of his shop with one of the patients?—Not to my knowledge.

Can you state that he did not?—He did not to my knowledge; I think I should have known it if he had, and I do not know that he did.

You do not know whether this person, with whom it is supposed he left the key, administered medicines to the patients?—I do not.

Do you know whether the medicines generally in use at the hospital, especially the bitters, are prepared by one of the patients?—No; there used to be a patient, who was in the hospital thirty years, who used to help Mr. Meadows, and he could make them very correctly indeed, and the man is there now; at times he is very poorly, and at other times very well.

Did you ever state to the Governors that the apothecary was an unfit person to be in the situation?—No, I do not recollect that I did; I have thought him a little unsteady sometimes.

Not only on account of his neglect, but being a married man; is not that contrary to the rules?—It is.

He is a married man?—He is; I did not know that when he came.

You knew it afterwards?—Yes; he was on the point of going away when I knew of it.

Was not it known he visited his wife, and she came to him?—She was not there three times, and I looked upon her as his sister.

Is the apothecary employed by you in transacting your private business?—No.

In collecting rents or attending sales, or any thing of that sort?—Oh, no; I might send him to call for a little bill, or any thing of that sort.

Who superintends the hospital in your absence?—I and Mrs. Dunston; we are never absent together, nor have been for above thirty years, and we sat down with that intention when we went to it.

How are the assistant master and matron employed?—There is an assistant master at this time employed under me.

Is the assistant master's time taken up in any other avocation for your private advantage, or that of Mr. Dunston of Broad-street, your son?—No, not that I know any thing of.

Is there generally a deficiency of two or three of the servants allowed by the hospital?—No; when one goes away another comes.

How is the assistant matron employed?—In attending to the linen.

Does the assistant matron ever go out to take the care of ladies who may apply to you for a keeper?—Never; she has been there these thirty years, and never goes out at all.

Was she not with a lady at Halstead, in Essex, four or five months the last year?—No; I have had servants that when they have left me have gone out with people.

The question is, whether during the time she was assistant matron of the hospital, she did not go out to take care of ladies for private emolument?—No, she did not.

You know that she was not with a lady at Halstead for four or five months the last year?—I do not know that she was, and I must have known of it if she had.

Did not a female lay herself upon the fire one evening, which occasioned her death, and was not an alarm given by a gentleman passing along Old-street, who saw her passing the windows in flames?—There was a woman who secreted herself, and the fire was raked, and she went and clapped her clothes all over the fire and cinders, and so she became on fire; the maid was just by her and laid her down immediately, and took her into her own room; she lived two or three months afterwards, but it was her death subsequently.

Had you an inquest upon her when she died?—No, the surgeon and doctor attended her.

Have not you several houses in which you accommodate patients to the number of three or four in each?—Not one, nor never had.

Do you mean to state that the private madhouse in Ivy-lane, Hoxton, did not belong to you, and that you did not receive the emoluments?—I am only the landlord, and never received any emoluments from it; our committee investigated that and were satisfied of it, that I only received the rent.

Mr.
Thomas Dunston.

Do you mean to say, that you never have been at any time since you have been in the situation at Saint Luke's, the master or owner of any house for the reception of lunatics, and that you have never derived from any such house any emolument, as partner or otherwise?—I do.

Are you in the habit of recommending patients to Mr. Warburton?—I am.

For those recommendations do you receive any emolument or advantage whatever?—None whatever; Mr. Warburton has made my wife a present of a gown, and sometimes has given my son a few books.

You receive no pension or advantage?—No.

Nor no pecuniary allowance?—No.

Nor no profit or allowance in any way whatever?—No more than what I have mentioned.

Beyond that, no advantage has resulted to you from those recommendations?—No advantage whatever.

Have you now any patient confined in Saint Luke's, by means of an iron collar round his neck?—None; we never had.

You have stated that those patients who dirty themselves have clean blankets every night; are they fresh ones, or the same that have been washed during the day?—They are mostly fresh ones, or those that have been dried; we keep a fire to dry them.

Do you recollect a patient, in 1812, falling down the straw shaft, and dislocating his thigh?—There was one who fell down, and hurt his hip joint.

Was the dislocation ever reduced?—I am hardly able to say.

Did not the patient die within a fortnight?—I do not remember, but I think not.

How happens it there can be any doubt of the surgeon having applied his skill?—I do not recollect the particulars; I know there was one fell down, but I believe that she did not die, and I remember the surgeon was applied to.

You recollect the injury?—Yes.

But you do not recollect whether the complaint was treated, or not?—I cannot say particularly to that.

Is there no record kept in the hospital books of accidents happening?—None, that I know of.

If a person destroys himself, is that put down?—Yes; that is entered in the committee-book.

But not if they meet with any accident short of death?—No; a surgeon is sent for directly.

The entry of the death of this person would appear in the book?—Yes.

But not an accident, and of course not the date of it?—No.

Do you know that the practice of muffling exists?—No, never; sometimes the maid has tied a bit of sheet or something round the nose to dun the noise, to see whether it would quiet them; at other times put them by; some of them will bawl from Monday morning to Saturday night, and she has put a shutter up to prevent their disturbing others.

Do you know of the practice of forcing a patient, when they have been unwilling to take food?—Yes; I have done it many score times.

Have you had any injury in consequence to any of the patients?—Not with me, in any instance whatever.

Do you recollect any such instances in your house?—No.

Have you ever employed any of the keepers about business not connected with the hospital?—Not particularly, that I know of; they have gone with an errand or a message, or something of that kind for me.

Was not one of the keepers named Thomas Flower employed daily for a month or two in looking after your son's shop?—Not that I know of; there was one Mr. Drury, an apothecary, used to go down to attend my son's shop for Mr. Rogers, and Mr. Rogers paid him for it.

Did you not permit a keeper named Thomas Flower to work at his business as a baker, for six successive months, to enable him to pay you a small debt?—No, he went away; and I in fact bought the lease of a baker's shop to put him in it, because he married one of the servants, and I lost £. 20 by him in consequence.

He was not employed as a baker while he was a keeper?—No, he was not. I beg pardon, there was a man who went to our baker's for some weeks; he used to go once or twice a week to make himself fit for the baking business; he married one of the servants in the house, and I let him go to fit himself for being a baker.

He used to go in the night?—Yes, part of the night.

Is your son's linen washed by the servants of the hospital?—Some little of it I do not deny; his frills and handkerchiefs, and such things.

Jovis, 29^o die Februarii, 1816.

Lord ROBERT SEYMOUR in the Chair.

Mr. *Thomas Dunston* again called in, and Examined.

YOU recommend frequently, or advise, the families or friends of lunatics to take them to Warburton's?—Sometimes, if they ask me the question I do; never without.

Mr.
Thomas Dunston.

Does that often happen?—Frequently.

Is it to one only of Warburton's houses?—Sometimes to one and sometimes to the other; I say they live very well, and are well taken care of, for any thing I know.

You recommend occasionally to either of the three?—Yes.

Whitmore House, Talbot's, the White House, and Rhodes's?—Yes.

When the patient proceeds to Warburton's for admission, what certificate of insanity does he take with him?—He takes a certificate from the person who sends him, and the medical man.

From the friend or friends who commit him, and from the medical man?—Yes.

What may be the meaning of *the* medical man?—Our apothecary mostly, mostly the apothecary of the house, sometimes the surgeon.

That man has been admitted with a certificate into your house?—Yes.

Do you in any way countersign the certificate for admission to Warburton's; does your name appear, or do your initials appear?—My initials have appeared.

Do your initials usually appear?—Sometimes they have, sometimes they have not.

What is the object of the insertion of this letter in the certificate?—I have no meaning, only that the keeper of the house may know they come from St. Luke's; I have no other meaning in it.

The persons you refer to have been already in St. Luke's?—Yes, and discharged uncured at the expiration of twelve months and six days.

What may be the advantage of Mr. Warburton, the keeper, knowing that those patients do come from St. Luke's?—I do it upon these grounds, that they have not much to spare, that they are mostly poor, and to be as moderate with them as possible; I have no other meaning.

The meaning of this letter is to prove the poverty of the patients?—Yes, he came from St. Luke's, and it well known that those who go from us have nothing to spare.

Are you now speaking of pauper patients?—Sometimes they are poor people, more needy than paupers on many occasions; and I have sometimes written at the bottom, begging them to be as moderate in their charges as possible, for that the friends could not afford to pay much.

No Governor can recommend a patient to St. Luke's, unless he is in poor circumstances?—He cannot.

A certificate of a patient going from St. Luke's to Warburton's, proves that he is poor?—It does; when it has been suggested to me, from knowing the distresses of the family, I have begged them not to take more than twelve or thirteen shillings a week, for that the family could not afford it, and I have saved scores of people in my lifetime pounds and pounds by it.

The insanity must be proved, and the qualification of poverty must appear to the Governors of your Hospital?—Yes.

How does that appear?—From the certificate of the churchwardens and overseers, and the minister of the parish, where they have resided; and the gentlemen of the committee always examine it strictly when they come, and if they find they have sufficient to support themselves, they do not admit them.

Are many of these parish paupers as well as poor parishioners?—Many of them.

What is the weekly charge?—I believe the paupers pay about ten or eleven shillings a week: from ten to eleven shillings I think is the usual charge, and the friends pay something more.

Every patient in your house, male and female, lies alone?—Yes, all in separate beds, but in some rooms they have two or three beds; and I have in some of the rooms put two bedsteads in a room on purpose for safety; for they will try all schemes to make away with themselves, but where there is another in company they will not do it. The gentlemen have asked me why I allow two beds in
a room,

Mr.
Thomas Dunston.

a room, and I have given that as my reason, and that it is not for any other reason whatever.

Have you ever, in the course of your practice, known an instance of a lunatic making an attempt upon his own life in the presence of any other person? I do not know that ever I did.

Do not many of your patients dine together?—Yes.

Do you trust them with knives and forks?—We never trust them with any; the meat is cut thin and laid upon trenchers, for fear of any thing of that kind occurring.

You have repeatedly assured the committee, that you have no interest whatever in either of Warburton's houses? Nor no others; I have sent servants out who have lived with me and gone out, and have never received a shilling in my life.

What number of patients have you in St. Luke's now?—I think 264; the number is very low now to what it has been; we have had 340 or 350 waiting for several years.

There is no candidate for admission now?—No.

Of those 264, can you inform the committee how many are under personal restraint; how many are chained or in straight waistcoats?—I cannot exactly say; there may be sixteen or eighteen; or there may be two or three more. Many of them are in a poor lost low state, and tearing their things to pieces; to prevent this, we are obliged to keep them in waistcoats in the day, for no other reason but that.

Of those sixteen or eighteen under personal restraint, what proportion are without clothes?—None without clothes; they are got up every day, and their clothes put on, and the waistcoat over.

Miss —— referred to in your evidence yesterday, went from St. Luke's?—She was discharged well and went home to her friends. I have ascertained, that since I attended the committee yesterday, she relapsed and came back again; it was the second time she was with us she became pregnant; she was again discharged well.

Do you know any thing of her having gone to Warburton's afterwards?—Only by hearsay.

She did not go with any certificate from you or the surgeon?—No, she could not, for she was discharged well; there was no certificate at all.

What was her situation in life?—Her grandfather was a stock-broker, and her father was a stock-broker; and I heard her own father went beyond his mark in speculations or something, and was written up in the hall, and dismissed, and did not go there afterwards, and the grandfather followed the business; he was a very respectable old gentleman.

Do you consider her as having been a very poor woman?—I think she was, for she had nothing but what she got from her grandfather; and her grandfather kept the son and his family.

Have you been able to ascertain any further circumstances respecting the intercourse between the keeper Dowding and Miss ——?—The father and grandfather and myself talked to her many times, I suppose for ten days, desiring to know how it happened, and who it was; she positively declared to me over and over again, that it was her own brother. I never saw any person stand to any thing as she did; at last I persuaded her to tell me, and she did; she told me it was Edward Dowding, and that it happened in the dusk of the evening, when he went up with the beer, behind the door; there were two patients in the room at the same time, and never saw it; and he told me the same himself, when I found it out.

Did the keeper when taxed confess it?—On being a good deal talked to he confessed it.

She having charged him with having got her with child, and he confessing he was the father of the child, you dismissed him?—Yes, I did, as soon as I could find out the facts.

Is that the only case in which a female patient has been got with child in St. Luke's?—I never remember one before nor since.

When you found her with child, did she lie in in the hospital?—No; she went home to her friends before that time.

Had she come in as a parish pauper?—No; her grandfather put her there, and her own father was there I believe at the same time; he was a patient in the house part of the same time that she was.

She charged her brother with having been the father of the child she bore at that time?—Yes.

Was the brother in the house at the time then?—No, the grandfather, the father, and the brother, all came to me in the parlour, and we taxed her all together, and she bore us out before his face that he was the father.

Had

Had he been to see her?—No, he had never been near the house, he could not have done it in our house, for he never came to see her, therefore I was sure it must be untrue.

No male keeper has access to any of the insane women, but at meal times?—No, unless they are wanted; if a patient is very obstreperous, so that they cannot manage her, they send for a man.

How do they get in when they are sent for?—The same key unlocks all the gates. I lock them up at night, so that they cannot get into the gallery without my leave.

In the daytime the same key will admit them?—Yes, but they do not go.

How do you know that they do not go?—I should be sure to hear of it, there are no secrets amongst them.

Does not each male keeper's key give him during the day access to the female wards?—They have a key that would give them access, or we should be very much at a loss; if any thing happened we should not be able to get there in time to save any mischief, if it was not for that.

You say that no knives and forks are allowed, but that the food is cut for them, and served to them in trenchers?—Yes.

How is it with patients that wear a straight waistcoat the whole of the day?—That is cut by the servants in their room, and they are fed with it.

The servant applies it to the mouth of each patient?—Yes.

And the same with respect to what the patient drinks?—Just the same, there are several of the patients that are out of the waistcoat, that will not eat or drink unless they are crammed, they will not take it themselves; they will not resist it if we feed them, but they will not take it themselves; that is the case with two at this very time, several of those in straight waistcoats are undone while they are at dinner; some we can trust, and some we cannot.

Your keepers have in consequence of that some additional labour?—Yes.

What may be your number of keepers at this time?—Only one to each gallery; there are always some patients better than others, and the best doctor they have is employment; if we can get them to assist the maid, that does them a great deal of good; the servants are obliged to have some of the patients to assist them.

How long have you been employed in this line?—I believe about four-and-forty years.

How long have you been in the situation of master of St. Luke's Hospital?—I think between three and four-and-thirty years.

You as master, and your wife as matron?—Yes.

With what salary did you commence the office of master?—I think at first we had but sixty pounds a year between us, there were but thirty or forty patients at that time.

This was in the old hospital?—It was? the gentlemen then gave us some gratuity; the committee have many times told us that we were not half paid; we have never gone out of the house together.

You have occasionally received gratuities from the general committee, in consideration of their approbation of your conduct?—Yes, I have, and that very lately.

At the last court did you receive any gratuity?—It was passed by the court, I have not yet received it, they voted me fifty pounds.

In cases of sudden death at the hospital, you have stated that there are only particular cases where the coroner sits?—Yes, in cases of suicide.

Has that been the practice ever since you have known the hospital?—Yes.

Did you ever hear a reason for not summoning the jury in cases of sudden death as well as *felo de se*?—No, I never did; there was one coroner when I first came to the house; there was a coroner, I think the gentleman's name was Beach, that had given Mr. Mansfield, the first master, a general warrant whenever any thing happened to bury the people when any accident happened? that is forty years ago, I dare say.

Had you any general warrant from the coroner?—Never.

You never had any coroner's inquest except in cases of suicide?—Only in cases of suicide.

When a patient dies suddenly, and has not been seen by a medical man?—We have had a case of a patient who has died in a fit, and a medical man has been called in.

Is it the practice where a patient dies in a fit, and is not seen by a medical man, to have a coroner's inquest?—I never remember an instance of that.

Mr.
Thomas Dunston.

Is there not a resident apothecary in the house?—Constantly.

Does he see the patients every day?—Regularly every day.

If a patient were to die suddenly in the night, without having been seen by a medical man, should you call for the coroner's jury.

There was one man who was taken in a fit while the servant was feeding him, and they took him to bed, and the apothecary was sent for to him and saw him, and he died after that.

If a medical man, on being called to the relief of a dying man, found the patient in question dead, would you in that case send to the coroner?—Yes, if he was dead I should; but I never remember but this instance, and then the apothecary had seen him, and we did not.

If one of the patients knocked the other on the head, would you in that case send to the coroner?—Yes, directly; but I have not had any experience of that.

No man ever died so suddenly, as not to have seen some medical man of the establishment, before he drew his last breath?—I do not recollect one instance of the kind.

For some years Dr. Simmonds was the superintending physician at Saint Luke's Hospital.—He was for more than thirty years.

Did you know him well?—I did.

Did you ever converse with him respecting the management of Saint Luke's?—I have many times.

Did you hear him say any thing on the subject of frequent visitations of Saint Luke's Hospital by Governors or others?—I have many times. He thought the less they were visited the better, that it irritated and disturbed them much, and made them much worse than they otherwise would be.

Their seeing any body?—Yes.

Do you know any thing of the Doctor's interference with the committee, desiring them not to visit too frequently?—I think I recollect his applying to the committee, and wishing it not to be.

You do not recollect how that arose?—I believe it was from a disturbance in the house among the patients, on visiting days, that they used to be mixed men and women together. They were very bad, and the people would, out of humanity and tenderness, bring them things to eat, and they were then ill for two or three days. The Doctor interfered, and it was then altered to once a fortnight.

Do you recollect any interference on the part of Doctor Simmonds respecting the committee visiting?—Yes, I think I recollect his interfering and saying, that if they visited, it made the patients more insolent and impudent than they otherwise would be, as they have been, I am sure.

Do you not think, that if there was a separation of the lunatics into smaller classes, the evil arising from visiting would be very much diminished?—I think it might.

Do you remember Mr. and Mrs. Ford, who were assistant master and matron of the hospital?—Yes.

When did they come?—As much as two or three years ago; they were there six or seven weeks, and went home one week or ten days.

Did they come recommended by the committee?—No, only by my seeing the man at the house, and understanding that he kept a house for the reception of people at Maidstone, or some place in Kent; and he came in and was there for a time; but we went to the committee at Batson's. I do not know of whom the committee consisted, but the treasurer and six or eight gentlemen. They saw Mr. Ford, and they called me in and asked me about Mr. Ford; and all that I said was this: that I could not say so much as I wished to do. And one of the gentlemen said.—“Mr. Dunston, we are of your opinion; we do not think he is a man that will suit us.” And I said, I was afraid not; indeed, I was sure not; for I did not suppose him to be so unwieldy a man as he was; he was a lusty man. But his wife told our apothecary, Mr. Drury, at that time, that he would not wash his face for three months together, if she was not to stand and do it for him.

To what should you attribute the falling off in the number of Saint Luke's Hospital at present?—To the institutions in the country, I should think.

How many vacancies have you in your house at present?—Thirty-six. I have never known such a thing for years.

Have you been able to ascertain who was the female who attended a lady at Halsted in Essex, four or five months last year, and whether she was an assistant matron in Saint Luke's?—I have ascertained who the person was, and that she never was a servant in Saint Luke's Hospital; her name is Tow.

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Mr. *Edward Wakefield*, Land Surveyor, called in, and Examined.

YOU have lately visited the New Bethlem Hospital?—I was at Bethlem Hospital on Saturday last, in company with Lord Robert Seymour, Lord Binning, and the honourable Henry Grey Bennet, members of this committee.

Mr.
Edward Wakefield.

Have you any observations to make upon what you saw there?—The manner in which the day-rooms are heated is particularly to be found fault with; they are heated by steam conveyed up a tube, which tube is at the heat of 212, consequently subject to patients burning themselves by putting their hands against it.

Are you aware that Mr. Haslam said, that in one instance a patient did burn herself?—Yes; the patients also complained, that holding their heads over this tube in order to obtain warmth, that they grew very sick; also that the air in the room being heated by means of the tube, remained in a stagnant state; and that the true way to warm any apartment is by heated air at the fountain head, as it were continually pouring into the room and going out again by a ventilator, which at once carries heat and ventilation into the apartment; that by a contrary system being acted upon in these apartments, the smell was very offensive.

Did you observe that the sleeping-rooms were insufficiently heated?—I did not observe that they were heated at all.

Are the sleeping-rooms glazed in every instance?—On the basement story they are without glass, and the frames having iron bars between them, and also a projecting iron in the inside of the rooms, which acts as a fastening to the shutters, and which would allow patients likely to commit suicide to destroy themselves. I understood that those windows were not intended to be glazed. If any opinion still continues to prevail, that maniacs are not susceptible of suffering by cold, I had a striking proof on Saturday of their love of warmth, by seeing them huddled together in the offensive smell of the day-rooms for the sake of warmth.

Did you make any observation upon the windows?—In the two middle galleries the recommendation of this committee has not been pursued, and the lower part of the window still remains blocked up. In the basement floor and the upper gallery, the patients can look out of those windows, and it is the best denial that their inclination to break the glass is the reason why the windows of the other galleries should not continue to be blocked up. Mr. Haslam stated that there was a form, which when patients restrained themselves, they were allowed to stand upon to look out of the windows by way of indulgence; upon Lord Binning's asking to see the form, the keeper said there was no such thing in the men's galleries, but that there was one in the women's gallery. Lord Robert Seymour again asked the man, why they did not allow the patients a form, the keepers distinctly stated, that they knew of nothing of the sort. In those galleries in which the windows were so low that the patients could look out, and which in the upper one they evidently enjoyed doing, not a single pane of glass was broken, nor did the keepers state that any had been; and in one of the galleries there is a glass door, which is defended from any accident of the sort by a strong wire between the glass and gallery, which might, if necessary, be used to the lower panes of glass throughout the windows of all the galleries; it would seem, therefore, that there would be no danger in glazing the sleeping rooms, from the fear of the patients breaking the glass.

Did you learn the number of patients in Bethlem when you saw it on Saturday last?—There were only 122; and it is very important to remark to the committee the fact, that this great hospital is only half filled.

What number is the building capable of holding, as it now stands?—It can with great ease hold 200.

To what do you attribute there now being so small a number?—I attribute it distinctly to the exposition of the management of Bethlem Hospital before this committee the last session of Parliament, and to the same medical officers still remaining, whose conduct was so completely amalgamated with the government of that institution. I understood when I visited the hospital on Saturday last, that no medical treatment was at present pursued, or according to the accustomed medical routine of that institution, would be pursued until next May; that thus a patient put in in October, would stand no chance of being cured in a state of incipient madness, by any application of science till the spring of the year.

Did you observe any means used for the employment or amusement of the patients?—The convalescent women patients were employing themselves, most of them seated at the windows in the keeper's rooms, either at work or reading; but this was the only thing at all like moral treatment throughout the hospital; the men were sitting in an unemployed idle state in the day rooms, without any means being thought of to lead their attention from the disturbed objects with which a diseased mind is pervaded; indeed, it struck me, that the hospital on the male side particularly, was much more like a lock-up house to confine persons in, than an hospital for the cure of disease.

Mr.
Edward Wakefield.

Were not you likewise at Whitmore House at Hoxton?—I was at Whitmore House on the same day, in company with Lord Robert Seymour and Lord Binning.

Have you any observations to make upon the accommodation of Whitmore House, or the treatment of the patients?—The visit was certainly unexpected by Mr. Warburton, who we found at Whitmore House, and who immediately took us to the basement story, which has been called “the regions below;” this apartment was occupied by eight or nine females, some of whom were not aware of the necessities of nature; and upon the whole there was nothing that struck me to find fault with in the comforts which they received there; it appeared to me that the rooms were clean, and that the apartments had the advantage, although the basement story of the house itself, still as it respected the gardens, was a ground floor, as there was a door out of the sitting-room which opened into a garden from the basement story. I went into a large room called the lower tapestry, in which were four ladies and a female keeper; this room has in it four turn-up beds, which have the appearance in the day-time of book-cases; the room is large and particularly airy; and it was really a pleasure to see beings under so miserable a disease so well treated as they appeared to be, during the short visit that was paid.

Did you inquire whether there were beds placed in the gallery?—The gallery is divided at night into two distinct apartments by folding doors; and in each of those apartments three turn-up beds are put down, the door cases of which form a separation at the head of each, and those sleeping-rooms are occupied by male patients, and at the further corner is a bed in which a servant sleeps; they always have a servant sleep in the room; the visit lasted about three hours, and was extended to the whole house, the general comfort and cleanliness of which can deserve nothing but approbation. The house stands in the midst of very fine gardens, of the extent of five acres, and such of the patients as can enjoy it when convalescent, are allowed to amuse themselves by keeping fowls or rabbits, or cultivating a small piece of garden ground.

How many patients are there?—There were about eighty patients, both male and female. If the committee will have the goodness to allow me, I wish to make an observation upon a part of the evidence which I gave the last Session of Parliament to this committee; I then stated the opinion which I had formed from conversing with the several keepers of madhouses, that medicine had no effect upon this lamentable disease; but the year’s experience has very much altered my opinion upon this subject; my attention was particularly attracted to it in consequence of receiving a letter from Dr. Finch of Laverstock, in which he stated, that it was a very great error; that it was a disease, which in its incipient state was capable of relief from medicine; and I accepted an invitation from him to go down to Laverstock, where I examined the register of the many cases which had come under his care, and he has completely proved to my satisfaction, that medical treatment is of the greatest consequence; and in this opinion, he is entirely corroborated by the important evidence which you lately heard from Sir Henry Hallford. I consider the report of this committee will probably form the standard book upon this subject, and that therefore it is highly important that no erroneous opinion should go forth. I wish to say a few words upon the benefit or injury which may arise from inspection. I can have no doubt, that there are patients whose disease is very much irritated by the sight of strangers, and that therefore it requires great caution how such persons are seen in a hurried manner; that although this may be the case with some individuals, the very great majority of persons find a relief by conversation with visitors, and it forms a subject of conversation and of employment to the mind for a considerable time afterwards.

Is it not the practice of this gentleman, Dr. Finch, to give employment of different sorts to his patients?—The difference in that respect between the asylum at Laverstock and all the institutions surrounding this great town is most striking; the want of room about them necessarily keeps the patients confined together, but those under the care of Dr. Finch are continually in exercise or under amusement, the male patients, a certain proportion of them, ride out coursing at this time of year daily on the Downs; there are bowls in the garden, there is a billiard room in the house, they play at backgammon, and it appears to be his great object to keep the mind continually at work, upon any thing but that which engages it under disease; he keeps a carriage in which the ladies ride out; they are amused in various ways.

Those latter circumstances have contributed much to the cure of such of his patients as have been restored to a state of sanity of mind?—I consider that Dr. Finch bestows his attention upon moral treatment as well as medical. I know various persons who have been cured under his care, and it affords me great pleasure to state to this committee, that the cured form a great proportion, I believe, arising very much from being placed under his care when first attacked; but no doubt the majority of his patients in the establishment must be in a confirmed state of insanity, and for the whole he provides the amusements which I have described.

Are

Are there any pauper patients in this establishment?—There are some pauper patients who are in a building at a distance from the house, but they are employed in gardening and various pursuits about the premises. It is much easier to find employment for persons accustomed to labour than for others.

Mr.
Edward Wakefield.

What do you suppose those patients who have all those indulgences pay annually each of them?—That entirely depends upon the manner in which their friends either can afford or chuse to pay; many gentlemen have horses kept for them, and one servant to one gentleman, which must be expensive. I believe there is a lady there for whom a carriage is kept.

Do you know whether each of the male pauper patients has a bed to himself?—I cannot speak to that.

Mr. Thomas Warburton called in, and Examined.

WHEN did the medical commissioners visit Whitmore House?—I think about six weeks ago.

Mr.
Thomas Warburton.

At what hour?—I think about five o'clock.

Did they go all over the house?—I believe they did, I was not there at the time; I understood they had made a very minute inspection of the house.

Have you read the evidence given by Mr. Rogers before this committee?—I have, under the indulgence of the committee.

Are there any observations you wish to make upon it?—No further than a direct contradiction to every assertion he has made.

How long have you known Mr. Rogers?—From the commencement of his being an assistant to Longley and Dunston, who were apothecaries to my house; that might be I think about the year 1802.

He acted as assistant apothecary in your house for some years?—For several years.

Had you any reason to be dissatisfied with his conduct?—Not particularly; he seldom acted under his own guidance; it was his duty to attend the house every other day; Mr. Dunston generally came about twice a week, and prescribed such medicine as he thought right; in the meantime this person came to attend the patients, more I should rather think to report than to prescribe.

Mr. Rogers states in his evidence, that in Talbot's house he performed an operation, cutting off a part of the feet of an unfortunate female patient, which had mortified from cold; is that a true statement?—I recollect the circumstance of the female he alludes to; it was a case of extreme torpor, no circulation, a case of paralysis, and I believe nothing could have prevented mortification taking place; the patient I know was taken very great care of, and every thing done to prevent it.

Do you think the disease was caused by cold?—I am certain it was not.

Has it often happened to you to have the pauper patients that are confined in those rooms in the yard, in which there are no fire-places and consequently no warmth, suffer from cold during the winter, so as to have their limbs affected by the cold?—In no one instance but the one alluded to no such instance ever happened; chilblains will take place, especially with paralytic patients who have no circulation, but those patients are kept particularly warm, they are got up in the daytime and taken into a room called the paralytic room.

How many patients sleep in those places?—The number I cannot positively state.

Are they all paupers?—Yes, none but pauper patients are there.

The rooms have no fires in them?—No.

How many sleep in those rooms?—It depends upon the size of the room; I should think in the largest rooms which have heretofore been, there may have been sixteen or eighteen; but a room has lately been built for that very purpose, containing considerably more.

Still without a fire-place?—Except the fires underneath, which always keep the rooms above very dry and very warm; I speak of the rooms within the sphere of the house.

In the former rooms there was no fire underneath?—There was not; they were on the ground floor, and were generally so in every establishment for paupers; but I do not think it a good system.

What means have you of keeping the patients warm?—By blankets, rugs, and things of that sort, and warm bedding.

Did not many of those patients lie upon straw?—A great number.

Were not some of them almost uncovered, refusing to wear any thing about them?—It is impossible to prevent that, unless the patient is so confined as that he cannot move to throw it off.

Mr.
Thomas Warburton.

Under those circumstances, were not the patients who were without clothes and lying in straw, affected by the cold in the winter.

Every possible care was taken to prevent it, by confining those who would throw off their clothes from doing so; but an accident of that sort might happen.

In point of fact, it hardly ever happened?—I never knew an instance of an injury so much as any boy has received at school from a chilblain, or not more; the instance alluded to was a case of paralysis, there was no circulation.

Having given this specific contradiction to one of the facts stated by Mr. Rogers, you mean to state generally, that all his facts and his charges brought against the establishment belonging to you, are totally groundless and false?—I do; there is one statement given by him of a servant striking a patient, and that the servant was kept for two years afterwards. The servant did remain a length of time in the house, but he was removed from the care of any patient; he was kept in the house for cutting provisions, and doing things of that sort.

How long was he kept in the house?—A year and a quarter, or probably a year and a half.

Was he a keeper of brutal manners?—I thought not myself? he was a man that I had a very good opinion of.

Had you any other complaints of his conduct?—I think not, I never heard of any; he ceased to be a keeper as soon as a person could be got for his situation.

The reason of his removal was his having struck a patient?—Yes; for it is a maxim in the whole of my establishment, if any man strikes a patient, except in defence of his own life, and unless it is apparent that his life is in danger, that he shall be dismissed immediately. Mr. Rogers has mentioned to me, during the time he was in attendance at the White House, that in any case requiring great care and attention, and particularly good nursing, that he recommended they should be sent to that house in preference to any other, for he was sure they would there be taken care of.

Mercurii, 6^o die Martii, 1816.

The Right Honourable GEORGE ROSE in the Chair.

Mr. James Simmonds called in, and Examined.

Mr.
James Simmonds.

WHAT is your situation?—I am head keeper of Bethlem Hospital.

How long have you been a keeper there?—I have been in the hospital between seventeen and eighteen years; I have been cook eleven or twelve years of the time.

Had you had the care of insane persons before you were made a keeper at Bethlem?—I was with a Mr. Clark of Lisson Green, Paddington, for some time.

He was a man of very large fortune?—Yes; then I had not the care of him; I used to go out and walk with him, along with Doctor Monro's man.

Can you state to the committee any particulars respecting the management of insane persons in Bethlem, with which you think it desirable the committee should be acquainted?—Mr. Tilley Matthews I knew very well; he was there many years; he died out of the house.

State to the committee whatever you think it important for them to know respecting the treatment of patients in Bethlem?—I cannot think Mr. Matthews was treated properly; he was a gentleman; he had had a genteel education, and I did not think he ought to have had the treatment he had, for he never would offend any body that did not offend him.

What was the nature of the treatment he had?—I rather thought it was harsh upon him, because he would not submit to the apothecary; he was chained by the leg just before that, and having affronted the apothecary, the keeper, William Hawkins, who had the care of him, I being assistant keeper, came to me and said, you must go along with me to put a pair of handcuffs on Mr. Matthews; I said there is no call for my going, for he will not resist at all. I went up to the door, but very reluctantly; the handcuffs were put on.

Who ordered them to be put on?—Mr. Haslam, the apothecary.

How long did he lie handcuffed and leg-locked?—I think a matter of two or three years; he never went near a bit of fire. I used to go up and undo his handcuffs when the keeper was out, to put him on a clean shirt; his friends used to wash his things at Camberwell; his wife and sister used to bring his clean linen, and when the clean linen came on the Monday, the visiting day, I used to go up and undo his handcuffs, and help him to put on a clean shirt, and then he used to have his blanket gown put on; he used to request somebody to mend his pens; he had two pins for a compass, and some pens and ink, and used to write a great deal.

Was

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Mr.

James Simmonds.

Was he quiet when the handcuffs were taken off?—Yes.

What was the reason they were put on again?—He used to talk a good deal against the apothecary, but never before any one offended him.

He never injured any one with his hands?—No; I must say, I went very reluctantly to assist in putting them on.

The irons were put on to punish him for the use of his tongue?—Yes.

You think he was not likely to do injury to himself or any person?—No, unless they offended him.

Do you know in what situation of life he had been?—I think a tea-broker; he lived in Leadenhall-street; he used to talk and run on, that he was the emperor of all the world, but nothing else.

Did he appear to suffer from cold?—No; he never had any chilblains that I recollect.

What became of him?—They thought proper some years after that to let him walk about loose, and he used to write a good deal; and I believe Mr. Staveley, one of his friends, thought of taking him out.

Was he taken out of the hospital?—Being ill, they thought that the best way was for him to go into the country. Mr. Crowther recommended this, and his friends paid half and the hospital half, and he went to Mr. Fox's house, where he died.

Had he those abscesses in his back of which he died when he left Bethlem?—Yes, he had; and I believe they were the occasion of his death.

Had he them during the time he was leg-locked and handcuffed?—No, he had not; but that might very likely be the occasion of bringing them on.

You have said, that he would not offend any body unless they offended him; what sort of resentment would he have shewn?—Only with his tongue; but if any other patient, who was dirty, went into his room, he would turn him out, and perhaps give him a kick.

You never knew an instance of his offering personal violence to any one?—No never.

He was considered as a sort of sight in the hospital?—When any visitors came he was shewn to them, and his writings.

State what you know respecting the treatment of Mr. Glover.—Glover was incurable; he used sometimes to go through to the apothecary's, and to attend the kitchen fire, and such things as that; and sometimes he used to say he was ill and would not go; he said he was not well, and could not go; and they thought he was lazy; and one afternoon it was reported that he made free with a little girl, about seven or eight years of age, pulling her about; I cannot speak to that, only that they said so; they rang the bell, and I took Glover and chained him by the leg. Mr. Haslam was out at the time, and the keeper was out at the time; I was assistant keeper, and I told the keeper of it; and when Mr. Haslam came home the keeper told him of it; and he went to him, whether that night or the next I cannot tell. Glover was ordered into a different room, where there was very little light to be seen; he had his head shaved, and a blister put upon it; and nobody went near him but the keeper. For several months he was kept so.

Was he frantic?—No, I never saw any harm in him.

He was in no state that you thought warranted the confinement?—No, I did not see the man grumble. I used to go to him now and then.

He was not dangerous?—I never saw him dangerous to any man; he was very quiet at that time. He had committed an offence before he came there, killing his own child; but that was through jealousy, and he never behaved incorrect while he was there, that I know of.

How long was he confined in this way?—I know it was for several months, but I cannot say how long.

In what situation of life had Mr. Glover been?—I think he was a shopkeeper. When the apothecary thought proper he let Glover out.

Was he blistered all that time?—I do not mean to say he was blistered all that time.

Have you any recollection of his being in the cold-bath at any time?—No; that was not Glover; that was a man some years before that, I think fourteen or fifteen years ago. I do not know the man's name who was kept in the bath too long. I happened to go into the bath side-room (a room for patients who would not keep themselves clean; there was a place where they used to warm the water, to put the patients into the hot-bath when they wanted it. They used to put dirty sheets into this place, to wash the filth out, before they sent them to the wash. There was a man entangled in the sheets; he had had a paralytic stroke. I went

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to pull this man out; and I got him out, and I laid him on the floor and rubbed him. I went to the house and called for the apothecary; I sent the maid up two or three times; and it was twenty minutes or half an hour after I called him before he came. The man was dead; he was alive when I found him. I rubbed him with salt and such things.

Did he fall into the bath?—Yes; he fell back into the bath, and being a tall man he could not get out.

Do you think he received injury in the bath?—I think he was too long in the bath.

How long was the apothecary in coming after you sent for him?—I have no doubt he was twenty minutes.

What message did you send?—I sent word that a man had got into the bath, and that I begged him to come and see whether he could save him.

Was there an inquest upon the body?—No.

Is it the custom in Bethlem when there is a patient dies suddenly to have an inquest?—No; only when one patient knocks another down, or when they kill themselves. When Hadfield knocked Ben Swain over the form and he died, there was an inquest.

How did Swain come by his death?—Hadfield, who shot at His Majesty, knocked him over the form one morning between eight and nine o'clock; he died immediately. He struck him on the head.

Do you remember any treatment of him by the apothecary because he refused to work for him?—No; I cannot speak to that. Benjamin Swain was many years chained by the leg.

Was he a quiet inoffensive person?—I used to think him not very quiet; but I never saw any harm of him; he was let loose in my time.

If you had him in the hospital at present, in the mode of treatment now adopted there, should you keep him chained.—No; I should not think he required it.

Upon the whole, as an experienced keeper, has it occurred to you that unnecessary restraint is put upon the insane persons in Bethlem?—No; I do not think there is unnecessary restraint, but I think they ought not to be kept in so long; they are very seldom chained now except they are dangerous to themselves. They have a pair of handcuffs, and walk about; they are not chained unless there is a very bad patient who will not keep in bed, they chain him by the arm for fear of his getting his clothes off.

Are not the patients infinitely better clothed now than they were some years back?—I think they are.

Was it not the practice in old Bethlem, not in the late gallery, but in the gallery pulled down, for eight ten or more patients to be fastened to the tables, almost in a state of perfect nakedness?—Yes; they used to think they tore them all to pieces, some of them would do that.

In point of fact, were they not fastened to the tables, sitting in a state of perfect nudity?—There used to be so at the table; they were chained all round.

There is no person in that state at present?—No; none at all. The old steward, Mr. Alavoine, never interfered with the patients, only clothing and feeding them; the rest lay with the apothecary.

Were you well acquainted with Norris, during the time he was confined there?—Yes.

Were you present when the chains were put on?—No; we have a holiday out on a Sunday once in three weeks, and my turn happened to be when he stabbed Hawkins and Taylor.

He was a very violent outrageous patient?—Yes; he was at times.

Is it your opinion, that you could have kept him secure without the employment of those chains?—They were at first invented with handcuffs, and then he had a basil on the hand, and there was a chain rivetted into the wall, lest he should get loose, and there used to be another chain into the next room to pull him up, but be used to get a string and tie to that, that they could not pull it up.

Used it not to be an amusement to persons who came into the hospital to pull that chain up?—I never saw that.

Did not other patients do it?—They could not get into that room, for it was generally kept locked, and they used to put a man of no sense into that room.

Do you know who was the inventor of those chains?—I believe it was the apothecary; as to the iron jacket, I believe that was a committee job; but I had not the care of him then.

Had you the care of him after that?—Yes, for three months after he stabbed the keeper.

Was

Was he very ferocious?—He was pretty well.

Do you think you could have kept him without these chains?—Some chains were necessary, but I think not quite so many.

Do you not think, that if he was in Bethlem, at the present moment, he would be suffered to walk about the gallery only manacled?—Yes, our present steward would see into it, though Mr. Alavoine never did; though a good sort of a humane man as ever was, he never thought of looking into those things; he was very old.

Do you know any thing of the broken arm Norris had?—I was down in the kitchen; but I heard say that he had made a dirt he could not help, and that the keeper went with a shovel and gave him a knock on the arm, and that he got away the shovel from the keeper, and that that was the way he got his arm broke.

Used the weekly committee to go constantly round Bethlem and examine every cell?—They used to go monthly I think, and the doors were all opened, but the apothecary always told their cases to the committee; the keeper never looked into that, and the doors were always open to Dr. Monro, and he used to ask them how they did, but the apothecary told him how they were, and Dr. Monro was very much wrapped up in the apothecary, and used to believe every thing he said.

The system of treatment of those patients is infinitely more mild at present than it was in the old Bethlem?—I think it is.

Have you any reason to believe, that this system of mildness is not better calculated than one of severity to restore them to reason?—It is a great deal better, for that only made the patients more mad than they would otherwise be; they cannot be treated too mildly; I cannot say but that Norris once offended me much, he got loose, and threw his filth all over me.

You have no doubt that a smaller quantity of iron than that he wore would have held him at any time of his confinement?—I think it would; when I first came there he was a man that used to help in serving the patients, he was a very good assistant, and used to take the bowls of gruel, and put them to cool for the patients, and so on; he was useful to the keeper at that time.

How long had he the chain round his neck?—I cannot say; I had left the gallery when that was done.

But a considerable time?—Yes, a good many years; I used frequently to go and sit down, and talk to him when his door was open.

According to your observation, have the patients been much attended to for their bodily complaints?—I cannot say; since the apothecary has lived out at Islington, he has not attended so much as if he had been in the house, the nurse used to make the medicine and physic in the morning, and the keeper used to give it them sometimes; he came every Tuesday in the summer time, and sometimes not.

Have medicines been frequently administered to them on account of their insanity, independent of any visible bodily complaint?—Yes, in the summer time; in the winter only just to keep their body right, their stomach and bowels.

That was attended to at all times was it?—Yes, when the keeper gave notice.

There was a soldier in the Guards there last week, has he received any medicine since he came there?—Yes; he had some medicine I think on last Monday; I took the powder myself, and gave it the keeper.

Have there been many persons die since they have been admitted into the new hospital?—Very few; I believe there was a black died who had been there a week or a fortnight; I do not recollect any others.

Is Mr. Haslam to-day in London or in the country?—I believe he is gone down about a trial at Reading.

Is not Dr. Monro gone likewise?—No, I believe not.

When did you see Mr. Haslam last?—I have not seen him since the committee that was on Saturday; his son has attended the house since.

Do you mean that he has gone as a witness to the assizes?—I believe so.

Were not Dr. Monro and Mr. Haslam absent in Devonshire for a considerable time together last summer?—Yes, they were.

For what time?—I think near a week.

What was the occasion of their absence?—They went as witnesses in a case of insanity.

By whom was their duty done in their absence?—I think young Dr. Monro was there; but I do not recollect any apothecary.

Do you know whether he did the duty of his father with the consent of the Governors?—I believe he did, for he came some Saturdays to the committee.

And you saw no person attending for Mr. Haslam?—No.

Mr.
James Simmonds.

Has it been much the practice of Mr. Haslam to furnish the nurses with medicine in quantities, to be by them divided among the patients?—No; only that in summer time, they used to make a quantity and give it out to the nurses.

Then they judged how much each patient should take?—Yes.

That you can say from your own knowledge?—Yes; I know two of the keepers used to go round with a little cup, and they used to give it at the discretion of the keeper and the nurses.

Were you the person who advised this soldier having medicine on the Monday?—No; Mr. Haslam went round on Sunday afternoon; he went to this man in the Guards, and asked him whether he had had a motion; he said no; he said, then he would give him a powder, and he ordered me to come down for it, and to give it him on Monday morning.

Mr. John Woodall called in, and Examined.

Mr.
John Woodall.

What is your business?—A smith, residing at No. 22, London-Wall.

Did you make irons for a patient in Bethlem of the name of Norris?—I did.

By whose directions?—By order of the committee; I have my book here, which I beg to produce.

Is this your order book?—It is my day book; it was put down by order of the committee originally, the entry is in this form:—"June 23d, 1804, Bethlem; To two bolts and nuts and screws, three feet nine long;" these were to go through the walls of one cell to the other, to fasten a brace, which I will mention the next article; "To a new round rail-bar for head of bedstead in one of the cells, for Norris, seven feet long; To a new collar for Norris's neck, with two joints to ditto, and two basils for his arms, and five chains, and seven rings to go over the round bar; To two men one day and a half boring holes through brick walls, and fixing the round bar and rivets, and rivetting on the neck-collar and the basil, by order of the committee." The round rail was that which went through from one cell to the other, and the bolts going through were to hold that round rail; then the collar had seven links to let him go up and down.

What was the length of the chain?—I suppose it might be about a foot.

Who was present when those chains were put on?—I attended the committee myself on the Saturday, and Mr. Haslam and Dr. Monro, to the best of my recollection; Mr. Crowther I am confident was there, and I think Dr. Monro.

You are sure Mr. Haslam was there as well as Mr. Crowther?—Yes.

Who assisted in putting those chains on?—The smith.

Was Norris tranquil?—He was very violent indeed. I attended the putting them on; there were also the keeper, and some of the other patients might be there. I think Hawkins was the keeper at that time.

Was Mr. Haslam there?—Mr. Haslam came in while we were about it, and came and saw it afterwards.

Had you any conversation with Norris at the time?—No, not at that time, I had afterwards; he afterwards got the irons off.

Do your books enable you to say what the weight of all this iron was?—No, the weight is not mentioned; the weight of the bolt through the wall is mentioned; but that he did not bear.

What should you think the weight of it?—To the best of my recollection, I should suppose it might be eight or nine pounds; the way this waist-belt was first adopted is this:—I was directed to go to Newgate, and to see some, or I might have guessed it myself; my father made some waist-belts for Mr. Akerman, that the prisoner might be moved and go in a postchaise, and it might not appear.

By whose order did you make those additional irons, of which you are now about to speak?—By order of the committee.

Do you mean that you personally saw the committee, and received the orders, or that a message was sent to you?—I attended the committee the same as I might attend this committee; and when the committee thought proper to deliberate I was desired to withdraw, and when the committee broke up I received my instructions.

Do you remember whether Mr. Haslam was present?—He was there at the time.

And he heard the order given you by the committee?—We call it the committee; it is very seldom I have orders to attend personally, unless there is something particular.

What was the amount of that conversation you had with Norris?—He had got those bandages off about the 12th of September 1814. On the 14th of September I have this entry:—Bethlem; To a new waist-belt, with two cross-pieces to ditto,
to

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Mr.
John Woodall.

to go over the shoulders, and two pieces with joints to go across the arms, and three men attending and fixing on Norris. This was shewn to the committee before ever it was put on.

Was Mr. Haslam present when that was put on?—It was reported to the committee, that he had taken off the other irons he had on, and the consequence was, an order of the committee to fasten him in some way that he should do no person a mischief, if I understood right; when he got the first waist-belt off he had got into such a situation, that when one of the keepers came, he almost knocked him down with it.

Was Mr. Haslam present when those new irons were put on?—Yes; Mr. Haslam and the medical gentleman who generally attended the Saturday's committee.

What conversation had you with Norris at that time?—When I had got my instructions to put him in a way that he should not use his arms, there might be a consultation of course; it was not my own suggestion altogether; but I had seen two of the patients in Bethlem. I remember that Mr. Arabin, the present steward, wished me to ask one of the patients about securing him. I told him I thought it very improper to ask a patient about securing him. I went to Norris, and said to him, Norris, why do you do this; you see you only bring trouble on yourself? He looked very wild and very vicious, and certainly did make a very good reply, which was; why do not they let me alone, or similar to that; if they will let me alone I will let them alone? I immediately said, now then Norris, you know what you are about; if you keep yourself quiet you will keep out of trouble; now I have orders to make you fast. He had got Davis, one of the keepers, down at this time, and was like to throttle him; and then this was made, and shewn to the committee before it was put on.

And put on in the presence of Mr. Haslam?—It took some time in putting on. Mr. Haslam did not stop all the time, but came backwards and forwards occasionally.

Can you speak to the weight of this additional iron?—I cannot immediately distinguish; there is no weight put down in my book; then there was another circumstance occurred after that, which was October 6th 1804; it says:—"Bethlem; To taking off, and taking to pieces, and lengthening the strap-jointed irons off Norris, and refixing." They were taken off, in consequence of his wishing to be indulged with having them banded round with list or something of that sort. I was there at the time they were taken off, and Norris did not put himself then in any violence, but he assisted in taking them off, and assisted in putting them on again; I was there at the time.

Were you in the constant habit of visiting Bethlem during the many years that Norris was confined in those chains?—Oh, yes; several times.

Did you think him so emaciated, that this mode of confinement had long ago become useless, in consequence of the facility he could thereby obtain of drawing his arms out?—It was not the department for me to interfere, being the smith, with the medical gentlemen. I have shaken hands with him several times, he never offered me any injury.

Did you not from the state of his appearance think that those irons were no longer necessary?—It is impossible for me to say; I have seen him, and only seen him sitting down.

He was very much emaciated latterly?—I had not seen him for eighteen months or two years before he died.

He was then very much changed from the man he was when he first had these irons put on?—I look upon it age might make some difference in the course of ten years, he was smaller on the wrist; they could not put a handcuff on as they do the other patients, for he would have drawn it off the wrists. Then, May 17th 1814, I have this entry:—"To cutting off links and rivets, and taking off the body fastenings from Norris;" that was the taking off before he died.

When you took them off before he died he was much emaciated?—I was not there at the taking off, but my man is in attendance who was. We only followed our directions in putting on the basils, or the leg-chains, or the hand-chains; that I considered by order of the medical gentleman, or if the medical gentleman should not happen to be there, the keeper speaks to the steward, and he would immediately send to our house, to put a staple to a bed-chain or any thing else, the same as any one would to mend a lock.

Do you mean to say, that the whole of this iron weighed only nine pounds? I do not count the bolts that went through the wall.

What weight of iron was applied to his person?—I allude to the waist-belt and the collar.

Do you include the leg-chains?—They had them themselves there. I speak only of what I furnished at that time.

Mr.
John Woodall.

You are in the habit of visiting Bethlem occasionally now; are you not?—Yes, my father and I have been smiths nearly forty years to Bethlem.

Is it not within your observation, that there is much less restraint by irons used now in Bethlem, than existed some years ago in the old hospital?—A great deal less.

Since what time has the diminution taken place?—Since this new institution there never was any one, in all my memory, had any thing like what this man had.

You have stated that there is now less restraint of irons than there used to be?—Yes,

Since what time has that taken place?—Only since the new institution, I think; or it might be since Mr. Wallett became steward.

You have made fewer irons lately than you used to make?—Yes.

You were asked whether, from your observation, there was less restraint latterly than there used to be?—Yes, for the last year or two.

Veneris, 8^o die Martii, 1816.

Lord ROBERT SEYMOUR in the Chair.

THE Honourable Mr. *Bennet* stated to the Committee, that he had received a Communication from Mr. *Lyttleton*, Member for Worcestershire.

[The Communication was then read by the Honourable Member, as follows:]

“ March 7, 1816.

“ EARLY in last November I visited, without notice given, or, I believe the least suspicion existing of my design, the Lunatic Asylum at Droitwich, a private house kept by Mr. Ricketts and his son, surgeons. It is a large building, retreating a good distance from the street, with a court before and a spacious garden behind, open to the country. I found Mr. Ricketts at home, who immediately and without any apparent reluctance, agreed to accompany me throughout the house, and in less than five minutes we began our progress. A printed paper, which I shall have the honour to lay before the committee, will shew the general nature and terms of the accommodation given; and it appeared to me, on inspecting the whole establishment in detail, that every class of patients was as well provided for as in their unhappy circumstances, and considering the pecuniary remuneration made, it was possible they should be. No complaints were made, except by one or two poor raving maniacs;—complaints which seemed to me entirely groundless; and I had the great pleasure of hearing several patients, whom I questioned on the subject, declare themselves perfectly satisfied with the treatment they received. One of the most intelligent, a gentleman of good education, said he was very much obliged to Mr. Ricketts. Others who were evidently afflicted with the deepest melancholy, and whose perverted minds might naturally have imputed some portion of their sufferings to the restraints imposed upon them, answered slowly and unwillingly, but complained of no ill usage. I visited all the rooms and cells, I believe without exception, and found them all well cleaned and ventilated. Most of the poorer patients were at dinner when I saw them, and the allowances and the quantity of the food were in my opinion perfectly proper. I went afterwards into the kitchen, examined and tasted the meat and bread, and found them excellent.

“ The number of patients was ninety-three or four, a greater number than had ever been in the asylum before. The number of keepers was thirteen, seven men and six women. I saw and spoke to some of these servants, and they appeared to me to be very quiet decent people. Mr. Ricketts opinion is, that the less violence is used in the treatment of the insane the better. ‘ He never makes use of the straight-waistcoat, which he considers,’ (I quote his own words) ‘ as one of the most inefficient and galling things which can be employed for securing a lunatic.’ To a powerful and robust man, he says in a letter to me (when such security is necessary) I use a small lock to each wrist, keeping the hands separate by means of a light chain; his shoes are taken off, and slippers of list substituted; which prevents any violence being done by the feet. This is in my opinion all that can be necessary. For females I generally use straps of leather, instead of iron manacles. I have several epileptic patients, who, to prevent their falling out of bed during their fits in the night, require (for their own safety) to be secured by a wrist-lock on one hand to the side of the bed.”

My

My own observation of the asylum at Droitwich confirms Mr. Ricketts statement; and in proof of the efficacy of such gentle methods as he has employed, I beg to refer the committee to a letter addressed to me by Mr. Ricketts; in which the committee will find the striking fact, that of three hundred and twenty-one old cases, many of which were those of persons removed from public hospitals, fifty-three only recovered; while, on the other hand, of two hundred and ninety-eight recent cases, two hundred and twenty-six have perfectly recovered. In the same letter the committee will observe some opinions and arguments on the necessity of applying medical remedies to insanity, which I venture to recommend to their notice, together with the outline of a plan suggested to Mr. Ricketts for the very desirable object of better providing for pauper lunatics. I shall also have the honour of offering to the committee a communication from Mr. Hallen, of Kidderminster, an attorney of the highest respectability; containing a remarkable instance of the shocking effects of the present total want of attention to the care and relief of those most unfortunate of human beings.

W. H. Lyttleton.

[The following is the printed PAPER alluded to in the above Letter:]

Droitwich Medical Lunatic Asylum, established in 1792.

“ Terms of Admission for Insane Patients, under the care of Mr. Ricketts and Son, Surgeons, Droitwich, Worcestershire.

“ 1st. Separate apartments, four guineas per week.—Those who pay this price have the best apartments; each male is allowed a man, and each female a woman servant, and every proper indulgence suitable to their disorder.

Three guineas per week.—The treatment in all respects the same, except having a separate servant.

2d. Associated apartments, two guineas per week, having convenient rooms allotted them. The above classes dine with the family, when their cases will admit of it.

3d. The Lodges. These are detached buildings, with wards for each sex and courts for air and exercise; of this department there are three classes:—1st. One guinea and a half per week are more nicely dieted and lodged than the under-mentioned. 2d. Pay 25 shillings per week. 3d class, One guinea per week; not allowed tea.

There are two detached squares for pauper lunatics of both sexes, who pay fourteen shillings per week, and one guinea entrance.

When suitable to the state of their disorder, patients walk in courts and gardens appropriated to each class and sex, who are kept entirely separate. No patient is taken for less than a quarter of a year, but should one be removed for any cause whatever before that time, the quarter must be paid for.

The same rule observed in case of death. Curable patients, after the first quarter, are charged only for the number of weeks; but a week entered upon, the whole is reckoned.

All patients find for their own use two pair of sheets, and four towels, pay the sum charged for one week as entrance, and five shillings per quarter for servants.

The above terms include the whole of the charge for board and medical assistance; washing is paid for separate.

No patient can be admitted until Mr. Ricketts had visited them, that it may be ascertained if it is proper to receive them, for which visit a reasonable fee is expected.”

[The following LETTER was then read, dated]

Droitwich, February 17, 1816.

“ SIR,

“ When you did me the honour of inspecting my house, you requested that I would make you any communication I thought proper on the subject of private madhouses. I have since read with surprise the Report of the Committee of the House of Commons on the subject.

“ I have been living in this house for more than twenty years, with a number of lunatics of all descriptions, during which time I have had under my care 619 patients; 376 males and 243 females; 321 were old cases, many of which were removed from public hospitals as incurable, and out of which number fifty-three only recovered; 298 were recent cases, and of which 226 have perfectly recovered; a fact of importance, to prove how much the cure of this deplorable malady depends on early medical aid; and I have ever considered this disease, in its incipient state, generally to arise from an undue determination of blood to the head, sometimes produced by a derangement of the digestive organs (in females particularly)

“ from suppressed evacuations, and almost invariably accompanied by a torpid
 “ state of the bowels, inducing inflammation in the brain and its membranes,
 “ and soon terminating in effusion or an organic affection, which produces
 “ an incurable disease, unless early and very active means be employed to
 “ remove it. It is admitted by Sir Jonathan Miles, that in his establishment
 “ (which is one of the largest in the kingdom) that no medical assistance is
 “ there administered in this disease. Doctor Monro states, that more
 “ depends on management than medicine. Good God, Sir, is it possible
 “ that hundreds of both sexes should be confined in a small place,
 “ and no attention paid to the cause of their deplorable malady? Nine cases
 “ out of ten of mental derangement in females under fifty, proceeds from
 “ sexual causes, very few of whom that I have seen but what have been re-
 “ stored. When the natural secretions are impeded or suppressed, are no
 “ means to be employed to invite them? Is nature to remain unassisted, and
 “ are the powers which are afforded us by the Allwise Being of relieving each
 “ other to lie dormant and untried? In such cases can management restore the
 “ unfortunate maniac without the aid of medicine? In mania, as in all other
 “ diseases, the cause must be removed before the effect can cease. How,
 “ Sir, can we wonder that great coercion is employed in large establishments
 “ so conducted, as in the one I have alluded to, where the disease must be
 “ aggravated by the patients not having their accustomed air and exercise,
 “ the peristaltic motion of the intestines must consequently be diminished,
 “ the determination of the blood to the head increased, and the disease be-
 “ come ungovernable. With regard to pauper lunatics in this country, I trust,
 “ for the sake of humanity, a great deal will be done for their relief; it generally
 “ happens, that in the first instance their disease is treated lightly, or the
 “ parish fearful of the expense incurred by supporting their pauper lunatics,
 “ chain them in the workhouse, or some much worse place, till the disease
 “ becomes highly alarming or incurable. Under Mr. Wynn's Act, vagrant
 “ lunatics are supported by the county at large; were this the case with all
 “ pauper lunatics, every parish officer would be anxious to obtain early assist-
 “ ance for these unfortunate objects, and would get rid of a serious expence
 “ to a small parish, which would be but little felt by the county. I think
 “ that licences in the country should be granted by the magistrates assembled
 “ at the Quarter Sessions only, who should appoint two commissioners, the
 “ one a doctor of physic, the other a member of the College of Surgeons,
 “ to whom all parish officers should, in the first instance, apply at their own
 “ expence; and upon one of those commissioners certifying that A. B. is a
 “ lunatic, any one justice should be empowered to send A. B. to a house li-
 “ censed for the reception of lunatics, at a weekly sum fixed by the magis-
 “ trates (Mr. Wynn's Act says fourteen shillings). Every licensed house
 “ should be open for the inspection of the magistrates and the medical com-
 “ missioners, between the hours of eleven in the morning and four in the
 “ evening daily. A case book to be kept, to enable the commissioners to re-
 “ port on every case what means had been employed to restore the patient.
 “ It has long been thought by some, that every county should be compelled
 “ to build houses for their own pauper and criminal lunatics; this would be
 “ thought oppressive, as I think the whole of the lunatics in any one county
 “ (some few excepted) would be supported at less money annually, than the
 “ interest of such money which would be expended in building. It would
 “ be useless for me to repeat to you the cruelty daily exercised on lunatics
 “ in workhouses. I have inclosed a letter written by Mr. Hallen, attorney,
 “ of Kidderminster, on the subject.

I have the honour to remain, Sir,

Your most obedient humble Servant,

William Ricketts.

[Mr. Hallen's LETTER was then read as follows.]

“ Dear Sir,

“ THE case of poor Powel, once under your care, is as follows:—The parish
 “ officers of Chesterton, not consenting to try the question as to his settle-
 “ ment, without his being actually removed to so great a distance in his mise-
 “ rable state, excited the indignation of the court of Quarter Sessions here, upon
 “ the trial of the appeal, that they ordered them to pay the parish of Hartlebury
 “ the whole of the expence they had been at; and such conduct made me
 “ suspect the poor creature would not be treated with that humanity he ought
 “ to be. Passing through Cambridge last year, where I slept, I got up early
 “ in the morning and walked to Chesterton; and, on inquiry, found him in
 “ a large house, without any other person living therein, lying upon the
 “ kitchen floor, upon straw, chained to the wall, and in an emaciated state;
 “ the door not locked, so that any person had free access to him. I called
 “ upon one of the parish officers, who had lately been elected, and represented
 “ to him the state in which the lunatic was; he appeared hardly to know that
 “ there was such a person; I took him with me to the house, where I found a

“ man

"man cleaning him out just like a pig, and he shivering with cold. The officer promised that proper attention should be paid to him; I found that the man who had the care of him, lived at some distance, was a man much addicted to drink, and frequently was not near him from three or four o'clock in an evening to nine or ten the next morning. Understanding that there would be a meeting of the magistrates that day at Cambridge, I attended; only one magistrate came, whose name I do not remember, which I regret, as he professed to be much obliged to me for the information I had given him, and promised that he would see that proper care was taken of the lunatic; and immediately sent for the parish officers, but they could not be found. In a very short time afterwards, the pauper was sent to a lunatic asylum at Hoxton, no doubt from the interference of the magistrate, whom I saw at Cambridge. Should your business take you to Hoxton, pray see him, as it would give great satisfaction to his mother, who lives near me, to know how he is. Wishing the laudable plan now in agitation, for the comfort of poor lunatics, to take place,

"I remain, dear Sir,

"Your's, most truly,

"Kidderminster, January 24th, 1816."

"W. Hallen."

Mr. John Haslam called in, and Examined.

THE Committee understand it is your wish to amend your former evidence?—There was an omission in the description I gave of the inconveniences resulting from the employment of the straight waistcoat, which I consider now as important to be mentioned. In addition to those mischievous effects already detailed, it should be stated, that the employment of the straight waistcoat, tends to render the person, if he should not recover, permanently dirty, which during the course of his life, would subject him to very inferior treatment, if such conditional filthiness about his person did not prevail; that is, by the employment of the straight waistcoat; those persons who are rendered incurable, would become not only incurable but dirty. It should certainly be a consideration, by attention to prevent in the incipient state of this disease, and during its progress, by other means, this condition of filthiness. Patients should not be allowed to drink very largely of any fluid going to bed, for the purpose of preventing their wetting the bed; and it is necessary with respect to their future comforts in life, that precautions should be taken to prevent this habit; for instance, I would have a patient brought every morning to the closet of convenience, and if his bowels were once evacuated, he would not be liable to dirty himself during the day; and I think I may say, from some attentions of that kind, I have seen very good effects result. There is another circumstance that was not at all mentioned at my last examination, and which appears to me highly important; and that is, enforcing food and medicine when it is not necessary; unless this be regulated by science, it would naturally occur to every keeper, if a patient would not eat, to force him to eat; he might consider it an act of humanity; but from a variety of considerations it would be a most mischievous practice, because persons refuse frequently food from a total incapacity to eat; from a total incapacity of the stomach to digest any thing that might be forced into it; and any thing taken in that condition of the stomach, would operate to the great inconvenience of the patient, if a man be at all confined in his bowels, without relief obtained; for that inconvenience, the employment of food would be a sort of superaddition, and therefore, forcing the patient, I think, should hardly ever be allowed without some superintendence of a medical person; and I have great objection also to the instruments with which these people are forced. The common mode of forcing is this:—the patient is secured, the mouth is pulled open in some way or other, as well as they can; and if there is a great deal of difficulty, you will find in most of the persons who have been forced, that the teeth are broken out by the bolt, as it is called, or spout; when the spout is put into the mouth, and the patient resists violently, it would injure the posterior part of the throat; and the number of persons whose front teeth are wanting, having been compelled to submit to this process, is a strong reason for an improved mode of treatment.

Did you ever know any persons die under the operation?—No, but I have seen the thing very nearly take place.

From what cause?—If it had been persisted in, death would have been the consequence.

From what cause?—The patient would have been strangled. Since the employment of my own instrument, no such mischievous effects have ever resulted, nor has a tooth been broken; but the strangulation, from blocking up the apertures, namely the nose and mouth, through which the patient should breathe, and the refusal of the patient to swallow, forcing back the liquor into the wind-pipe, would also contribute to strangulation.

How long is it since you invented your instrument?—I think it must be ten years, if not more.

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Has it been constantly in use at Bethlem during that period?—As far as my knowledge extends, it has; I have always lent it to the men, and in general I have done the business with the women myself.

Have you taken positive measures to prevent the mouths of men being forced open in any other way than by your own instrument, in the Hospital of Bethlem, while it was under your care?—I have taken every care in my power.

Do you mean to say, you was yourself present or called in on those occasions, to ascertain whether the forcing open the mouth of the patient was necessary or not?—I have been generally called in, and my opinion has always been asked, as to the propriety of such a thing being done, before it was carried into effect.

Do you know whether your instrument has been used at any other receptacle for the insane besides that at Bethlem?—Seven years ago I was requested to furnish the loan of my instrument to have one made corresponding to it, to be sent to the Liverpool Asylum, which I did; and I have frequently, to medical men, lent my own instrument to two or three of them, and given directions for the employment of it.

Do you know if this instrument was in constant and common use at Sir Jonathan Miles's?—I do not.

Was you a frequent visitant at Sir Jonathan Miles's?—On the part of the transport office I go twice a week.

What were the numbers you usually visited at Sir Jonathan Miles's on the part of the transport office?—I cannot tell the numbers I visited; I saw the whole of the patients.

Whereabout was the number?—More than a hundred.

Have you not reason to suppose, that cases in which it was necessary to force open the mouth, would happen as frequent among those persons as other lunatics in similar circumstances?—It must be presumed so.

Have you not had much intercourse with keepers of other insane houses besides Sir Jonathan Miles's?—No; I have been at least three or four times at Talbot's, and once at Rhodes's; that is the utmost of my knowledge of those people.

Do you know whether your instrument was in use at any of those houses into which you have been?—Not to my knowledge.

Have you any reason to imagine, that the practice of forcing open the mouth, which you have described as usual, was not practised at every one of those houses?—I believe so.

You have no reason to imagine otherwise?—No.

In the account you have been giving of the inconvenient operation of the straight waistcoat, do you mean to represent these consequences as following from the constant wear of it, or only from its occasional use?—In proportion to the time it is kept on, those effects will be more certainly produced.

Are you of opinion, that there would be any great danger of such consequences following, from only putting on the waistcoat during occasional violent paroxysms of insanity?—No; if those paroxysms could be ascertained to be of short duration.

If these patients whose paroxysms were of short duration, had the waistcoat kept on them no longer than the paroxysm required, there would be no reason to apprehend such consequences?—Implying such paroxysms to be very short, a temporary burst of passion, that would not last five minutes; I mean to confine myself to that.

From your experience of the treatment with which patients usually meet, do you apprehend that it is the constant object and practice of the keepers to remove the waistcoat as soon as the violence of the paroxysm disappears?—I should think not, certainly.

Have you no other connection with Sir Jonathan Miles's house, and had you no other object in visiting it, but merely to attend to the business of the Transport Board?—There are some of my own friends who are confined there.

Be so good as to explain what you mean by friends?—Some of my own personal acquaintance, who were also patients.

How came those patients there?—By my recommendation.

Do you mean to say they went with certificates from you?—Many have been admitted by my certificates.

Now be so good as to explain the use of your instrument?—The patient being placed on a level with the knees of the person using the instrument, it is necessary to have the head secured between the knees, and he should always be previously blindfolded, for if he is aware you are attempting to get this instrument into his mouth, he will very naturally endeavour to avoid it by clenching his teeth, but when he is so secured, upon the least touch with a feather on the nose, he opens his mouth to endeavour to sneeze, or by the application of a pinch of snuff, and frequently by talking to him, and when he opens his mouth, the instrument is to be introduced; but with females I have had little occasion to use the instrument, for when they have lost a tooth, the introduction of the finger will answer the purpose, the fluid passing through such vacuity; there is a great deal of nicety and
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address in pressing down the tongue; the nose being held, and the tongue being pressed down by this instrument, the patient is forced to swallow without the possibility of being strangled in his endeavour to breathe, and the moment he has swallowed, he can breathe, and he is compelled to swallow; but if you cannot get at the root of the tongue, the patient will keep the instrument in his mouth for a considerable time. It is highly necessary however, that a very small quantity should be introduced at a time, and it should be conducted into the stomach by repeated acts of swallowing.

Supposing the mouth was attempted to be forced open by your instrument, do you not think it would frequently be the case, that the teeth would be loosened or driven out by that instrument?—If it was improperly used.

Would it not be very easy for an ignorant or a careless keeper to drive a man's teeth into his mouth with your instrument?—Certainly, if improperly used.

Supposing the same means which you suggest to induce a patient under such circumstances to open the mouth, previously to the introduction of a key, do you not think that a careful and attentive keeper might not so introduce a key as to prevent any injury whatever to the mouth?—A common key certainly; it is constructed upon the same principle, with this difference, that it has not the same purchase.

As to the practice of Bethlem Hospital, how soon after a patient has received food is he forced to swallow it?—I would coax him and persuade him for twelve hours, but after twelve hours I think it is a fair time to force it.

Do you apprehend any serious inconvenience would arise from a patient refusing food for twenty-four hours?—I think twelve hours quite enough.

You consider that after twelve hours, there being a disinclination of the stomach to receive food, if there was an obstinacy of mind, they should be forced to take it?—Yes.

Have you lost many patients by starving?—No, I have saved the lives of many persons by this instrument. One woman was forced by this instrument for eight months, twice a day, and I believe is now walking about perfectly well; and before a patient is forced to take food, he should always have his bowels emptied.

Do you think, as a matter of fact, it is the common practice for the keepers usually to examine or ascertain, whether a man's bowels were empty before they forced him?—Of late, I believe, uniformly.

To what period of time do you refer when you say of late?—Since they became satisfied of the utility of my own instrument, that is a period of about eight or ten years.

Do you mean to extend that opinion to other places as well as Bethlem Hospital?—I am speaking exclusively of Bethlem Hospital.

Do you wish to make any other alteration or addition to the evidence you gave before?—There are a few trifling mistakes; one in which a question was asked me respecting the new ground, it is printed just the reverse of what I said.

In the questions which were put to you last year, respecting the salubrity of the situation of the new Bethlem Hospital, in St. George's Fields, the following appears—"Did you express no opinion on the salubrity of that situation?—and your answer stands—"My opinion must not be inferred from my refusing to depose to its superior salubrity."—Is that answer conformable to your intention?—In the answer, the word "not" ought to be omitted; it ought therefore to stand—my opinion must be inferred from my refusing to depose to its superior salubrity.

Since the new hospital has been inhabited, have you had many deaths?—We have had nine die since the middle of August.

Is that a greater or less, or an equal proportion to the deaths which you have had in the old hospital?—I think greater.

Can you assign any cause for that?—I think from the dampness of the basement story.

If I recollect right the basement story is paved?—Yes; the gallery and cells, and the flooring of the cells likewise.

When the different members of the committee were there the other day, they saw several women patients lying upon the ground; have you any doubt that that must contribute very much to injure their health?—I am perfectly satisfied of its impropriety as contributing to ill health, and I have accordingly, in a paper delivered to the committee, remonstrated against the continuance of such an evil.

What answer did you receive from the committee?—They ordered the pipe which is now in the middle of the gallery to be removed, so as to warm the cells, which, from the construction of those pipes, afforded no warmth where it was most wanted.

Is that alteration compleated?—It is not.

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Is it your opinion, that when it is completed it will remedy the evils before described?—I fear not, for this reason; if there be damp, it will be warm instead of cold damp; but the surveyor has said, though I cannot believe it myself, that it will cure the damp.

Of course, lying upon the stones, will be as prejudicial to the patient then as now?—Certainly.

When you go into the country, either as a witness to the assizes near London, or to Devonshire, who fulfils your duties at the hospital?—My son.

Can you go without the consent of the governors?—Certainly not.

During the time you were absent last year in Devonshire, did your son do the same duty in the hospital which you were daily accustomed to do?—I understood he did in my absence.

How old is your son?—About three-and-twenty; he is a surgeon in the navy. I delivered my keys to the Steward, and desired my son to attend the matron round the females gallery, and the steward round the men's gallery.

For what time were you absent?—I was subpoenaed to Devonshire; I was out of town I think thirteen days; and on my last absence, I went last Sunday night, and came back on Wednesday morning from Reading.

Is that permission to absent yourself recorded in the books?—I believe not.

Do you recollect having desired your son to do your duty for you during your absence?—Yes.

And when you returned he told you he had so discharged it?—Yes.

Will you take upon you to say, that you were not the contriver of that apparatus in which Norris was confined?—I solemnly state, that I was not the contriver.

Nor the proposer of it?—Nor the proposer. I had a different plan.

Do you mean to say, that when your prior plan was not adopted, you did not become the proposer of that which was adopted?—I solemnly state again, that I was not.

Were you not in the committee-room when they gave directions to the smith for making this iron apparatus for the use of Norris?—I presume I must have been in the room, but I do not recollect it, because for two-and-twenty years I have not been three times absent from any committee, and therefore the presumption is that I was present.

Do you recollect having been present at the application of the iron apparatus?—I was ordered to see it done in the same way as with respect to Hadfield, when he was committed to our hospital, I was ordered to see him confined.

Can you recollect at all who was the person that did propose that apparatus?—In my former evidence I said, I did hear that some violent men in Newgate required strong coercion, and that this was a model from that which was used there, but where I heard it I do not know; but I still maintain that which was floating in my own mind, from ulterior recollection, that I do believe the chain and collar to have been anterior to the other parts of the apparatus.

Did or did not Dr. Monro frequently remonstrate against the confinement in which Norris was kept?—I do not think he remonstrated; I think he has lamented; and I think he has gone further, he has wished to remove it if it were practicable. There does not exist, from my own personal knowledge of five-and-twenty years, a more humane man than Dr. Monro.

Had he ever recommended that instrument to be applied?—I never saw a man apparently so much surprised, as when he saw his name affixed to that record.

If then the irons in which Norris was confined, were not ordered or recommended by Dr. Monro, or by you, the medical attendants who were present at the committee, upon whom do you fix that order. Do you mean to say, that the committee, of their own judgment, without your approbation, and without the opinion of Dr. Monro, directed Norris to be put into these irons?—Wanting recollection, I can only answer that question by a reference to the minutes; I recollect the apparatus being brought into the room, and exhibited; I remember going and seeing it put on, but with respect to who was present at the discussion, I have no recollection.

During the twelve years that Norris wore this iron dress, did or did not Dr. Monro recommend that it should either be wholly removed or lessened?—If any thing of that sort transpired, it must have been a subject of private conversation between us; because no communication was ever made to the committee upon that subject.

You do not know that Dr. Monro recommended to the committee to take off any part of it?—If there had been any such recommendation, I should think there would be a record of it in the hospital.

Do you recollect the circumstance of a patient having been drowned in the cold bath of the old Bethlem?—No, I do not.

Do you recollect having been called by Simmonds, the keeper, to see the body of a man who had just been drowned.—I do not.

Lunæ, 11^o die Martii, 1816.

The Honourable HENRY GREY BENNET, in the Chair.

Mr. *William Ricketts*, called in, and Examined.

WHAT are you?—A Surgeon at Droitwich, in the County of Worcester.

You keep a house for the reception of Lunatics?—I do; and have upwards of twenty-years.

How many Lunatics have you there at present?—Eighty-three or eighty-five.

Can you state the classes in which they are?—I was not aware that I should be examined when I left home, and therefore have not any memorandum stating that fact; but I think about one half are paupers.

What is the nature of the accommodation of your house?—I have accommodations according to the different classes; according to their pay; patients of a superior class pay, some four guineas a week, some three, some two and a half, some two, some a guinea, and fourteen shillings a week pauper Lunatics, except the town of Birmingham, they pay only ten shillings, and the major part of the pauper Lunatics are from the town of Birmingham.

How many have you from the town of Birmingham at the rate of ten shillings a week?—I think about twenty-eight.

You are not able to maintain them so well of course, as those who pay fourteen shillings?—Yes, I do; I made a contract with the Town of Birmingham at that price, when my establishment was in its infancy, thinking it would be a recommendation of my house; and I have continued them at that ever since.

Are you accustomed to use medical treatment on the first entrance of the patients into the house?—I have ever considered a Maniac as requiring great medical aid in the first stage of the disease; I think without it there can be very little chance of a cure. I have had, during the last twenty years, 619 patients, under my care up to the first of January last; 321 were old cases, many of whom were removed from Bethlem and Saint Luke's Hospitals, and those principally epileptic patients; out of 321 old cases, 53 only have recovered. I have had 298 recent cases; when I speak of recent cases, I believe, most of those have become insane within a few weeks, or a few months; and out of those, 226 have recovered; this, I think, is a pretty strong, proof that the recovery of Lunatics depends, in a great degree upon early medical attention.

What is the annual average of recent cases?—That I am not prepared to state. After reading the Report of the Committee of the last Session, I was induced to look over my book, to ascertain the number of cures which had taken place in my house, and I selected what I knew to be old cases from the recent ones; and I believe this statement is correct.

Can you not give a tolerably accurate guess of the number of patients you admitted to your house last year?—I think I have, upon the average, from thirty to five-and-thirty annually.

Out of that number how many do you discharge as cured?—That I am not prepared to state.

Can you furnish the Committee with some tolerably accurate guess?—I cannot; I only know I have cured 226 out of 298 recent cases.

When you state them as cured, do you know whether any of them afterwards relapsed?—Perhaps out of this number there may have been three or four who were in the house a second or a third time, but the same means being employed they have always recovered.

The cases of relapse are not uncommon?—Not uncommon; but they generally get well.

What is the ordinary practice of cure adopted in your house?—When a patient is brought, in the first instance, I generally find depletion necessary, if the Lunatic is violent; I afterwards have him cupped; and the first thing I do is to empty the stomach and bowels by small doses of emetic tartar, or to purge them briskly with calomel, or other medicine. I generally found depletion in the early stage of the disease almost invariably succeed with proper moral treatment. I believe the disease to proceed most frequently from a derangement of the digestive organs; and without medical aid, in my opinion, there could be no chance of a recovery. In the majority of females between the ages of fourteen and forty, I think, it arises from a sexual cause, and almost all of those recover; but in my opinion they could not recover without the aid of medicine: moral treatment would not cure a mania proceeding from a sexual cause; all the management in the world could not do without medicine.

Do you find women more liable to that disease at one period of life than another?—Certainly, between the ages of fourteen and forty. It happens that they

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become insane about the period of the catamenia first appearing, and if that is retained, and proper medicines are given to produce it, a recovery of course follows; they all get well. In respect of diet, every patient in my house is fed daily by myself, my wife, or some part of my family, and they are dieted according to the nature of the disease. I should think it highly improper to give a raving maniac the same quantity of animal food as I should give to a patient in a different state; in the summer months we generally give them less animal food, because they are more irritable in warm weather, and we give them more vegetable diet, rice-milk, broth, and such things. It is a constant order I give my servants, never to suffer any part of them to be alone; we have different sitting rooms for the different classes, and they are walked in the garden and yards, two hours morning and evening; the convalescent women patients are employed with the servants; they assist in baking, washing, and household business; those of them who are of the respectable class are taken out by the servants to walk in the country frequently, and in a garden I have at some distance from the town; they accompany my family on a Sunday to church, many of them; the pauper Lunatics are taken out by my men-servants and work in the gardens, and I consider the employment of their minds, and constant exercise, as very essential to their recovery.

Why do you confine the employment in the garden to the pauper Lunatics?—When they are in a state of convalescence they are always more happy when they are employed, and then it is at their own desire; I cannot put a gentleman to work in the garden unless he wishes it, neither do I a pauper. Patients of the superior orders amuse themselves at cards; some of them are musical; they have a piano-forte; one lady plays and sings most admirably; and part of my own family being musical, we have generally, almost always, sacred music on a Sunday evening, where those who are capable, of the bettermost sort of patients, attend.

Have you any doubt that the occupation and employment of the mind and body in both classes is highly useful in promoting their recovery?—I have no doubt of its importance.

In case of furious maniacs, what is the nature of the personal coercion which you use?—I generally confine them in a small room; and if the patient is very violent, I secure him with the right hand to the bedstead, and the left leg when in bed: when they are up, and walking about, I generally use a small lock to each wrist, with a light chain about nine inches; if the maniac is very furious I put his hands behind his back. I take off his shoes, and make him wear list shoes; and so secured, I never knew a patient attempt to do a mischief to himself or others.

Always making it a point to leave one hand at liberty where it is practicable?—This sort of coercion I do not feel to be necessary for any length of time in bed; I secure them with the right hand and the left leg; they can assist themselves with the other hand, and they can turn themselves round.

Did you ever see Norris in Bethlem?—I did, some years ago; I had some conversation with him.

In the situation in which he was then confined?—Yes; which I considered one of the most deplorable things I had ever seen.

Have you any doubt, from what you saw of his mode of confinement, being well acquainted with the circumstances of his case, that, had he been under your care, you could have kept him from endangering the personal safety of himself and others, by different modes from those employed in Bethlem?—I have no doubt about it; I cannot possibly conceive there could a case arise, in which so much coercion could be necessary.

Have you ever had patients as furious as he appeared to have been?—At the time I saw him, he did not appear to be furious at all. I recollect perfectly well the conversation which passed when I first entered into his room; he said “you look like a man of some humanity; are you a Governor of this institution.” I said, “No, I am not;” he said, “I thought so,” and seemed pleased that I was not a Governor of the institution; and I was so shocked at what I saw, that I turned from him; I believe that was almost all that passed.

Did you make any remark to any one belonging to the Establishment?—I did, to the keeper who attended him.

Did he represent him as a furious patient, who could not be kept from mischief in any other way?—He did, and my remark was, I did not conceive such coercion could be necessary.

You entertained no doubt then, nor now, that so much confinement was not necessary?—I never saw a patient who required that degree of confinement in my life.

Do you not conceive that the personal restraint, under which you saw Norris, would in many cases alone produce mental derangement?—Yes; I think no man could be sane under so much restraint.

How long ago was it you saw him?—I think from five or six years ago; he was very calm at the time I saw him; I was at that time very well acquainted with the steward of Bethlem Hospital, Mr. Woodhouse, and I seldom came up to town without going to see the Hospital.

Have you lately visited the Hospital?—I visited it about a month ago.

Is the situation of the Hospital very different now from what it was when you visited it five years ago?—Very much so; in point of cleanliness nothing can be more so.

There are not so many patients in a state of personal restraint as formerly?—I think not, though there are a great many.

Not so great a proportion of those now in the Hospital?—I think not.

Do you remember that in the old gallery in Bethlem many of the patients were chained round a table on the left-hand side, almost in a state of nudity?—Yes, I do.

There is nothing of that kind now?—No; they are better covered now. There are several dirty patients in what is called the dirty room.

Have you visited Saint Luke's?—I have, on Saturday last.

In what state did you find the Hospital?—I found the house, as far as regarded the servants, remarkably clean; the walls excessively filthy: and I was very much surprised at being told by the keeper, that they had not been white-washed for five years. The keeper appeared to me a very humane and intelligent man. I saw very few people walking in the galleries, but the day-rooms crowded to excess, so much so as to be highly offensive. I think in one of the mens rooms there were not less than 40 patients, and the room small, and very ill ventilated. In my opinion there are not half the servants employed that there ought to be; if there were, perhaps the day-rooms would be sufficiently large; because one half of the patients may be compelled to walk about the galleries, while the other half of the patients were in the room; and then the rooms would not be so crowded.

There is no attempt at classification in Saint Lukes?—No, not at all; the furious and the melancholy are all together; and they appear to me to have no room for convalescent patients; so that if a patient has the least dawn of reason, when he comes to look about him it is enough to bring him back again into his old state.

No occupation, either bodily or mental?—No; the keepers told me what they wanted most, was employment for the men; that they often put the women to assist in washing with the servants of the house, but that there was no employment for the men patients, which I think is very much to be lamented.

Did you make any inquiry as to the manner in which they were fed?—I did.

What was the result of that inquiry?—He told me they were all fed alike.

As a professional person do you think that very injurious?—I should think so, indeed; I saw several patients there in a state of so much excitement that I should think it highly improper to give them any animal food while they remained in that state; I observed one female in particular who had an immoderate quantity of hair on her head; and I suggested to the keeper the propriety of its being cut off: she was in a state of excessive mania, leg-locked in a room with a great many others, some of whom were equally furious with herself, and some quiet; but it was a room of noise and confusion, having so many together; as far as my own judgment goes, I think it would have been highly proper to have kept these people, during that paroxysm of rage, by themselves.

What is your reason for proposing that that patient's hair should be taken off?—I conceive in all cases of excessive mania, there is too great a determination of blood to the head, and that the head ought to be kept as cool as possible, the head being loaded with hair, that must increase the heat; we generally keep their hair cut close, and in case of excessive irritation we apply wet cloths or the shower bath.

Have you any doubt that the mixture of the violent with the calm, the furious maniac with the melancholy, the convalescent with those in the height of their disease, is highly injurious to the recovery of every class?—I have no doubt about it.

Do you think it would prove an impediment to the recovery of a patient to allow him, during the time he is in a tolerably tranquil state of mind, to associate with such as are obviously suffering under any of the disgusting or affecting symptoms of the malady?—Certainly I do.

Have you any doubt that where a person is approaching nearly to a state of recovery his ultimate cure is very often destroyed, if not long retarded, by having kept constantly before his view patients in the worst state of that calamity?—That must be the case; I always remove my convalescent patients from those in a state of violence.

Do you not think that there are gradations in the mental aberration, in which the follies of one, being very different from those of the other, have a great tendency to correct each other?—No, not to be productive of any good.

So that a person does not by degrees recover his own natural strength of mind by observing the follies which pervert the understanding of another?—I am not able to give an opinion upon that point, for the reason I have stated, that, as soon as a patient becomes convalescent I always remove him from those people; I

Mr.
William Ricketts.

never associate him with them; I should consider it an act of cruelty to keep convalescent patients with those who were furious or melancholy: I always remove them from room to room, according to the state in which they are.

Do you know any thing concerning the manner in which the pauper patients are treated in their respective parishes in Worcestershire?—I have ever considered the situation of pauper Lunatics as deserving the most serious consideration, in a general view. When a pauper becomes insane, the parish officers are unwilling to believe that it is a mental disease, and seldom or ever take notice of it until it becomes dangerous; in most cases he is then consigned to the workhouse, where he is chained down, and nothing done for him till he becomes a raving maniac; and it very often happens that he is not removed from the workhouse until they are incapable of keeping him from his being in a state of violence, and then he is removed when some organic affection of the brain has taken place, and he becomes an incurable Lunatic for life.

Did any plan ever occur to you, which you thought would have a tendency to remove an evil so great?—There has; I think, if all pauper Lunatics were to be supported by the county at large, instead of the individual parish to which they belong, the parish officers would have an interest in applying for medical relief in an early stage of the disease, and by that means a Lunatic would stand a much better chance of recovery; the expense would be little felt by the county, but it is often a very great and serious charge to a small parish.

Were you able to learn the number of pauper Lunatics in your own county?—I never was; but I know there are workhouses in which they are miserably treated.

Can you state to the Committee at all, at what expense they are kept in those workhouses?—I cannot.

You cannot state the difference between the cost at which you would take them, namely, fourteen shillings a week, and that at which they are kept?—I cannot; but it must be a very few shillings.

The reason for their not being sent to you, or to others keeping houses similar to yours, solely originates in the expense?—I think so.

Can you particularize how the insane poor are treated in the poor-houses?—I have seen many chained down to their beds for weeks together; I think if all pauper Lunatics were to be supported by the county at large, it would be the interest of every parish to afford them the earliest medical aid; and if the magistrates of the county were to appoint medical commissioners, say a physician, and a member of the corporation of surgeons, who in all cases should examine pauper Lunatics, and the magistrates were compelled then to place them under the care of proper medical assistants. I think those commissioners and the magistrates should at all times have the power of inspecting houses so licensed, say between the hours of eleven in the morning and four in the evening; I mean that every magistrate should have that power; that a book of cases should be kept at all times open to the inspection of the medical commissioners, as to the mode of treatment adopted for the recovery of the pauper Lunatics.

Do you believe that the keeper of any licensed madhouse would refuse to open his doors for the admission of a magistrate of the county in which it was situate?—I never should; I do not know whether it has been done.

Had you ever occasion to force any patients to swallow food?—I do not think I ever met with that case more than twice in the whole course of my practice; they will sometimes refrain from their food, but never to any considerable extent, so that any injury shall arise to them.

Did you ever have occasion to force any patient to swallow food?—Perhaps I may, twice or three times in the course of twenty years, not more.

What are the means by which you so force them?—I, on one occasion, used Mr. Haslam's spouting-bolt, it is like a flat key, with a hole in the middle, but I never used it but once.

How soon after a patient's refusal of food would you think yourself warranted in forcing him to swallow food?—I should not mind their going without food for six-and-thirty hours; I do not think any injury could arise from that, but they are generally easily persuaded to it.

Do not you conceive that the callings of nature would induce many men, the second or the third day, to swallow food?—I never saw one that would not; the time I should wait would depend in a great measure on the state of the health of the patient; if it was a strong man I should wait longer; if it was a delicate female, where the circulation was languid, I should not wait longer than that; I have generally succeeded by persuasion.

In your practice, have you known many patients who have refused their food?—I have; but my wife is a woman of rather a superior mind; and if I have a patient among the females who is at all ungovernable, if they take an antipathy, I employ her to go and soothe them, in which she generally succeeds.

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Mr.

William Ricketts.

So that the patients have been induced by persuasion?—Yes; and that generally by my wife. I have always found them in that state that they could be persuaded to take it by gentle means.

Have you a greater number of candidates for admission than you can accommodate?—They are not candidates; the friends of the patients, in all cases, apply; it is not a public institution.

Are more patients offered to you than you can take?—My patients, I think, have not increased much within the last two years, I once had 93, I have now 85; I have generally from 80 to 90.

Do you believe, from what you have heard and learnt, that the disorder is increasing?—I believe it is, and I believe that is owing in a great degree to the want of proper medical aid.

To the non-application of medicine?—Certainly. It has been stated by some medical gentlemen who have been examined here, that there is a difficulty in giving medicine now; the bowels of lunatics are often in a very torpid state, but I have no difficulty whatever in purging them; if I cannot get medicine to operate, which happens very seldom, I remove the obstruction by injection; we have a large machine which we use, holding from a pint to a quart.

Are there not disorders which you cannot remove by injection?—Very few, where the rectum is filled with the fæces, and that is hard; if we cannot remove it by the machine, we can by the introduction of a candle, which breaks the fæces; but we can generally stimulate the rectum, by throwing up from a pint to a quart.

You are understood to have stated, that you separated your patients one from another?—Yes.

Do you class them according to the nature of their disorders?—I do.

You invariably class them according to the nature of their disease?—I do.

And never suffer them to mix together?—No; never the melancholy patient with the raving maniac.

Mrs. Elizabeth Forbes, called in, and Examined.

HOW long is it since you were elected Matron to Bethlem Hospital?—I was elected the 26th January, 1815.

Mrs.

Elizabeth Forbes.

When you first came into that situation, how many female patients were there that were in a state of personal restraint?—I think there were about 20.

Were they confined to their beds on straw?—The custom, when I first went, was only to get them up three days of the week, never on meat days; they lie in bed four days in the week.

It was the practice in the Hospital to keep them four days in the week confined to their beds on straw?—Yes; at least I was given to understand that was the rule; I was told by the keepers that that had been the rule, and I found that was the practice when I went there.

Did that go on for some time after you took your office?—For about a week or ten days.

What was the practice you adopted?—To have every one got up, and washed and dressed every morning, as soon as I got clothes for them, which was very soon.

At present you have not any one confined to her bed?—Not one.

How often was the straw changed?—I had the top straw changed every day, that which was at all necessary, the other once a week.

How often was it changed before that?—I understand the time was the same.

You were amply supplied with straw?—Yes, there was always plenty.

Did you ever hear it had been the practice in the Hospital, to beat any of the patients who were in a state of mania?—There is a positive rule against it, that if a keeper is known to strike a patient he shall be immediately discharged.

Have you ever heard that patients have been struck with keys about the head?—I believe it is likely they might sometimes, but unknown to the governors, or officers of the House.

Have you ever heard from any one in the Hospital, who had been an eye-witness of the transaction, that patients have been beat about the head with keys?—There was a circumstance occurred after I went there, of a female being struck on the head with a key; I had the keeper discharged. In a few days after, I had all the females discharged indeed but one.

Did you ever hear that the person who had so misconducted herself had done no more than followed the example which had been set her by the others?—When I went, there were only two female keepers, one a very good young woman, and the other a very bad one; I only brought one female from the old house, a very decent young woman; the others were discharged.

Mrs.
Elizabeth Forbes.

Was it not the practice in Bethlem, in case a patient was seized with a sudden fit of irritation, to chain them instantly to their bed, or to the wall, and keep them in that situation for a considerable length of time?—Not after I went there. I believe it had been the practice; but I never had a patient chained for more than a day; if it were necessary to-day, they were released to-morrow.

You have been told that was so by persons who were eye witnesses?—I have.

Was Ann Freeman chained for any time?—Yes, for eight years.

You have never had occasion to chain her since you came?—No, she has never been chained since. She wants a great deal of watching; she would not bear to be driven to any thing, all must be done by kindness, by humouring her; I dare say she would have been put under restraint many times if I had not had her well watched.

Has she had any medical treatment?—She is very healthy, she has never had even a cold since I came there; she is more fleshy now than she was at that time.

Do you consider the patients in the basement story to have suffered from the damp?—They have had bad colds, and have been rather unhealthy this winter.

Have you lost any patients in that story this winter?—Yes, Four.

Do they complain of the rheumatism?—No; we have not any on the sick list now.

What were the circumstances of the four deaths which have taken place?—It was from cold.

What were their ages?—None of them were under forty; one was eighty years of age, the other three between forty and fifty.

Were they rheumatic?—No, it was an attack of cold and sickness, and loss of appetite, it came on with severe colds: at first the circumstances of those four were nearly all alike.

How many female patients have you now in the house?—Fifty-nine.

How many of those are under personal restraint?—Three.

Do any of the female patients ever express a wish to look out at the window?—Yes, sometimes.

Is there a form for any of the patients to stand upon to look out at the window? Yes, if they ever desire it; sometimes we have a dozen down for them to use: they are always indulged with the means of looking out at the window when they please.

Mr. John Blackburne, called in, and Examined.

Mr.
John Blackburne.

YOU are a keeper at Bethlem?—I am.

Was Norris ever under your care?—Yes.

How long?—From April 1813 to the time he died.

Was he in the former part of that period, when under your care, often in a state of great violence?—Frequently.

Was he then confined in the same mode of personal restraint which was invented for him some years back?—Yes.

Do you think, from what you know of his habits, that you could have kept him at this moment in the Hospital, without that mode of confinement?—I do not know whether I could, the former part of the time I had the care of him.

You mean in the first part of the year 1813?—Yes; there might have been some other mode resorted to probably.

Do you not think that if he had been manacled he could have been walked about the gallery under your care with perfect security?—It is very probable it might have been so.

Did those fits of violent mania often come on him?—Frequently; there was seldom a day without.

Did they seem to be produced by external causes, any occasional irritations?—Principally imaginary causes.

Veneris, 15^o die Martii.

The Right Honourable GEORGE ROSE, in the Chair.

Mr. John Haslam, again called in, and Examined.

Mr.
John Haslam.

IT has been stated to the Committee, that James Tilly Matthews was confined in handcuffs for two or three years by your order; what have you to observe upon that?—Such statement cannot be true, on this account, that Matthews experienced no confinement after he had been a year in the Hospital; Simmonds having

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Mr.
John Haslam.

having stated that he had been seventeen or eighteen years only in the Hospital, Matthews having been admitted a year anterior to Simmonds, he could know nothing personally of any coercion which Matthews had undergone; Simmonds has likewise stated, that he used at this time, when he was so confined in handcuffs, to write a great deal, which I presume is impossible. Being asked as to the cause which might have produced the abscesses in his back, Simmonds refers to the weight of the chain, which he says might very likely be the means of bringing on the abscesses. I beg leave to observe, that he had no chain for many years anterior to the formation of these abscesses; and that the most probable cause of the formation of those abscesses was his being employed, by his own desire, to cultivate a garden, where he stooped considerably, and dug daily; he had a garden in a very high state of cultivation at the old Hospital; after such exertion he complained of pain in his back, and such is the most probable cause of the abscesses with which he was affected. With regard to Matthews's temper it has been stated to the Committee, that he would kick any patient who came into his room, which I never witnessed myself on any occasion. The next subject of evidence to which I would refer, is the case of Glover; with respect to any alleged maltreatment of Glover, it appears, that he was confined during the time I was from home, and therefore no order for such confinement could have been given by me. His head was blistered, with that of more than forty or fifty others, nearly about the same time, with a view of ascertaining the effect of such remedy in the peculiar state of insanity under which Glover laboured. It having been stated, that the man who died in consequence of having been put into the cold bath, was taken out alive from thence, I would beg to observe, that instead of application being made immediately for medical assistance, the servant having the care of him, laid him out, as he terms it, and rubbed him with salt, and such things, by which, if the man were really alive, considerable time must have been lost. With respect to Norris it has been stated, that the chains were first invented with handcuffs, and then he had a bassil on the hand; that a chain was rivetted in the wall, and another chain in the next room, to pull him up. From the conformation of Norris's wrists it is impossible that any handcuff could have been applied; the medical officers having been fully satisfied that was an inefficient coercion, never could have had recourse to that which on former occasions had repeatedly failed. The construction described referred to another person of the name of Abbott, who was also an incurable patient in Bethlem Hospital; it has been stated that the iron jacket was a committee job, it would be impossible for the person declaring that to have any knowledge of it, he never having been admitted to the business of the Committee; it having been observed that the nurse used to make the medicine, it is to be observed, that the quantity of materials were weighed out, and delivered to her, to put a certain quantity of boiling water on, there being no fire in the summer time to which I could have recourse. It has been stated that on two occasions, when I was absent at Exeter and Reading, no person was deputed to supply my place, nor did any one go round the Hospital and perform the duty; I beg leave to state that my son is now in attendance, and will satisfy this Honourable Committee, that during my absence every thing that was necessary was done.

Mr. John Haslam, junior, called in, and Examined.

WHAT is your situation?—I am a surgeon in the Navy.

Do you attend at Bethlem occasionally for your father?—Yes.

Mr.
John Haslam, jun.

When your father was absent at Reading and at Exeter, were you in attendance for him?—Yes.

And during that time you attended the patients in the Hospital regularly?—Every day.

Did you administer medicines to them?—Yes.

Did you examine the state of health of all of them during your father's absence?—Yes, every one.

In administering the medicines, had you regard to the mental derangement as well as to the bodily health; did you apply your physical aid to the mental ailments, or to the bodily ailments?—To the bodily ailments.

Mr. John Haslam again called in, and Examined.

WHEN you accepted of the office of Apothecary to Bethlem Hospital, did you conceive that the Committee expected from you so strict a confinement to the duties of that office as that you were never to absent yourself, even for the short period of a day or two, from attendance on the patients?—I never did absent myself without leave previously obtained.

Mr.
John Haslam.

Did you conceive you were so tied to the office you were never to go away on any account for a day or two?—I feel a difficulty in saying yes, or no; if I say yes, then I must add, I have been out frequently with leave; if I say no, there is a law enjoining

Mr.
John Haslam.

enjoining me to go round the Hospital regularly every day, without I obtain leave of absence.

Did you not then expect that, upon particular occasions, the Committee would feel no difficulty in giving you such leave of occasional absence?—Certainly.

Mr. John W. Rogers, again called in, and Examined.

Mr.
John W. Rogers.

IN the course of the examination it has been stated to this Committee, that you gave a bond to Mr. Talbot for 500 *l.* which has been alleged to be of no validity, and that that has been the occasion of disagreement between you and that gentleman; have you any thing to state to the Committee on that subject?—Mr. Talbot did lend me 500 *l.* at certain periods, for which I gave him a bond; which, as I conceived, was properly drawn up, as it was done by a person who had been a law stationer all his life-time. Immediately after the publication of my pamphlet in December last, Mr. Talbot wrote to one of the sureties of my bond, stating, that by my not having complied with the tenor of the bond, it was forfeited, and he must come upon her, and the other parties, for the whole amount, in case it was not paid in one week. On this I immediately sent Mr. George Concannon, of No. 5, Prescott-street, Goodman's Fields, to Mr. Talbot, tendering him the interest of the money, which he absolutely refused to receive, saying he would have nothing to do with it. Mr. Concannon then waited on Mr. Talbot's attornies, Messrs. May and Norton, of Bethnal-green Road, from whom he learnt that the bond was good for nothing. On this I waited upon Mr. Dean, a solicitor in Rutland-place, Charter House-square, to whom I stated the circumstances, desiring that he would wait upon Mr. Talbot's attorney, for the purpose of entering into a fresh bond, and of endeavouring to settle the business in the best way he could. Mr. Talbot's attorney then informed him, that the bond was good for nothing, that it was not worth a farthing; but why it was good for nothing, Mr. Dean was not told.

You are sure Mr. Dean said they did not tell him?—Yes.

In point of fact, have you paid any part of the five hundred pounds?—No.

Who drew up the bond?—A person who had been brought up as a law stationer of the name of Hughes, who lives at Lambeth.

How long ago was this transaction?—Two or three years ago; but I did not receive the whole money for a year and a half afterwards.

And the part of the transaction you have just stated has been since the publication of your pamphlet?—Yes; one of the sureties received a letter a few days after the publication of my pamphlet. In consequence of being pressed by Messrs. May and Norton to settle the five hundred pounds, for which they threatened to arrest me, I directed my Brother-in-law, Mr. Holmes, of 194, Oxford-street, to wait on them for the purpose of offering bills at different dates, and to settle it in the best way that he could; the Attornies said that they would not receive any thing less than the whole sum, and behaved in the rudest manner to him, by not listening to what he had to propose.

Where is Mrs. Humieres at present?—She is at Montrieul, or on her way to this country.

Do you know what her reason is for returning to England?—She is coming on the business of this Committee entirely.

Do you mean to say she is coming over to attend this Committee if required?—Expressly.

Do you know whether Mr. Warburton ever recommended Mrs. Humieres to any employment in the way of her profession, after she quitted the White House?—Yes, I do.

Do you know whether she conducted herself satisfactorily on that occasion?—I know that she did, from seeing a note which she brought from the lady in whose family she was.

A note from the lady to whom Mr. Warburton had recommended her?—Yes.

Have you, if necessary, any persons to whom you can refer, to corroborate the statements you have made before the Committee?—Yes, I have.

State whom.—Mr. Morgan, Surgeon, at Mr. Warner's, Crutched Friars; Mr. Elliot, No. 16, Wilderness Row, Goswell-street Road; and Mr. Sleep, Confectioner, Fish-street Hill. I beg leave to add, that I confirm all the statements I have before made.

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Mercurii, 20^o die Martii, 1816.

The Right Honourable GEORGE ROSE in the Chair.

Mr. *James Birch Sharpe* called in, and Examined.

HAVE you any observations to make upon any part of the evidence of last year, which you have had an opportunity of seeing?—I will, in the first place, observe upon my own evidence; and after that I wish to say a word or two upon two particular points in the evidence of Dr. Weir. Upon a review of my own evidence, I perceive I have committed an error; it was inadvertently. I answered, that I was paid by Sir Jonathan Miles; I was led to make that answer in consequence of the solicitations of Sir Jonathan to me, for six months previous to the first of last March; he endeavoured to impress upon my mind, every day that I saw him, that he was master of his own affairs; that the trust was dissolved, and that, consequently, I must be responsible to him; that he, in future, should pay me, and that I was to write my receipts as having received the money of him. I did so for two or three quarters previous to the first of last March, and it was from that circumstance that I stated he paid me, though since I find that it is not the case; and I did not remember at the time that the checks were signed by John Watts, his principal superintendent. Now, lest I should appear to make a contradiction in any thing that may be asked me to-day, I was anxious to state this, that I may not commit a wilful error. With respect to Dr. Weir's evidence, I consider the point as of great importance to my character in every point of view; he has stated in his evidence, page 153, "that whatever has been the description or character of any wound or sore in any of the patients, poultices have invariably been applied, and those renewed and regulated by one of the three menial servants;" against this I would wish to refer to a report by Dr. Weir to the Transport Board, dated the 20th of June 1815, containing these words: "The patient with the foul ulcer on his leg is still confined to his crib, from the want of pure air, proper surgical and physical treatment, appropriate diet, and sufficient room in the crib to keep the limbs in a bent position; the sore shows little or no disposition to heal; instead of poultices, the servants, for some time past, have applied to it a piece of rag, moistened with a solution of vitriol."

Mr.
James Birch Sharpe.

What you mean to state is, that neither one or the other was your invariable practice?—Exactly so; but I treated each case as appeared to me to be right at the time.

What was the amount of the salary you received?—£.147 per annum; that was the last year and a half I think.

Was that paid for attending only the marine patients, or paid for attending all the patients in the house?—It was paid for my attention to all the patients in that house, of every class and description.

Do you know what was the allowance Government made to Sir Jonathan Miles for the patients under his care for medical attention?—I have been informed by Sir Jonathan and Mr. Watts, that it was four-pence per head per week.

That would amount to from £.100 to £.120 per annum?—It would, upon the number reported to the Committee.

Have you for that given your attendance, or supplied medicines?—Both. I gave my attendance regularly every day once, and as frequently as occasions might require; and I also gave every description of medicine at my own expense.

What class of patients were there on the Government account?—I believe, independent of the marines and seamen, might be classed on the Government account, the Greenwich pensioners, the Chelsea pensioners, the artillerymen, and the foreign prisoners that might be there. That is a presumption of my own; but I conceive they were on account of Government,

In point of fact, you know that there were Greenwich pensioners, that were insane, under the care of Sir Jonathan Miles?—I do.

Were they mixed with pensioners from Chelsea, and from the artillery, as well as with the pauper lunatics?—They were in one yard.

Were you present when Doctor Robertson, the physician of Greenwich Hospital, was called in to inspect them; and do you know that the pauper patients, and others, were turned out of the yard?—I was; I saw that myself.

Mr.
James Birch Sharpe.

Was Doctor Robertson impressed with the notion, to your knowledge, that that yard was solely appropriated to the Greenwich insane patients?—He was so informed; and he expressed his satisfaction, that the yard was large enough for them.

Were criminal lunatics, as well as foreign lunatics, mixed along with them?—They were.

Are you acquainted with the manner in which those persons were brought up from the country to Sir Jonathan Miles's?—I know something of the manner in which the seamen and marines were brought from Haslar Hospital to Sir Jonathan Miles's.

State what that manner was.—I have known them to be brought early in the morning and late in the evening, generally on the outside of the stage; and I have known them to be brought in very severe weather in that way; so much so, that a fact I can state took place; a man died the next day, or perhaps in thirty hours after his arrival; and I have little hesitation in saying, that it was in consequence of his exposure to the weather.

Was it not the practice to chain them on the outside of the stage-coaches?—Yes; Mr. Watts has frequently told me this; I have not witnessed it myself.

Do you know any instance, in which the arms of a man, so tied with the ropes, were very much cut and bruised?—I know a case of that kind; a man, of the name of Murphy, was brought from the Batavia hospital-ship; I think he was brought two or three years ago; his arms were cut, evidently cut, by a ligature, no doubt, a rope; the whole of the muscles were separated, and the bone was exposed, when I was called to attend him; and the large scars that remain will show exactly how it took place, and the extent of it.

You attended him in that situation?—I did, and I healed him afterwards.

And you entertain no doubt that the wounds were caused by the manner in which he was tied?—I have not a doubt of it, it was very evident; he was brought back to Sir Jonathan Miles's again, insane, last August.

How long have you ceased attending Sir Jonathan Miles's?—Since the 2d of August last.

What was your reason for quitting?—It was stated, that in consequence of the appointment of Doctor Thomas Veitch and an assistant, to attend to the Government patients there, my services were no longer required; that was the ostensible reason.

Do you know whether Sir Jonathan has taken any one else to do the duties of your situation?—Yes, he engaged with a Mr. Collier at that time, not a member of the College of Surgeons; he was made so either this month, or at the close of last month; he is not in the list of the 26th of February.

Is it the custom to convey the insane seamen from the country to Sir Jonathan Miles's in the winter by night, and in the summer by day?—Yes, Mr. Watts has repeatedly told me so; it was a subject of repeated conversation.

Do you know any thing of the way in which those men are medically treated at Haslar?—I know they are treated as they are at all public hospitals, from the conversations I have had with medical men who have come from thence, and particularly a case in the month of July last; a gentleman was brought in in a very emaciated state, and he told me he had been bled and blistered and cupped very much.

Do you know that it is the practice to treat those patients so?—I have never seen an individual from that hospital, but what has been treated in that way.

Have you very often seen them come in that state, which Mr. Haslam describes in his book as the stupid state—a state of fatuity?—This gentleman was advancing fast to that state; and if he had once got into it, he could never have been recovered.

Did Mr. Haslam, while you were in the situation of surgeon at Sir Jonathan Miles's, attend patients in that house?—Private patients of his own I understood.

Do you know whether he received any emolument or salary on the part of Sir Jonathan Miles, for attending patients there?—I have been informed that he has received a salary, but for what purposes it was not stated; Mr. Watts informed me of that.

Did Sir Jonathan Miles ever inform you he had paid him a salary of any given sum?—Yes, he did.

To what amount?—£100 per annum.

Did he express to you for what purpose?—No, he did not.

Was

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Mr.
James Birch Sharpe.

Was he in the habit often of coming there to attend patients, other than his own private patients?—I believe twice a week generally, to inspect the seamen and marines.

Did he go round the house to see other patients, except the seamen and marines, and his own private patients?—I never knew him go round the house generally; I have known him go into other apartments to see particular private patients, that I knew he was desired by their friends to attend to.

But you do not know that he attended positively Sir Jonathan Miles' patients?—That I know not.

You were at the same time attending on the part of Sir Jonathan Miles, on the patients whom he had under his charge?—Yes, I was.

Did Mr. Haslam when he came to pay his visits interfere with any of your patients?—Never.

And you were employed by Sir Jonathan Miles to attend all the patients in the house?—Exactly so, or rather by the trustees of Sir Jonathan Miles.

The naval as well as the other patients?—Yes; all of every description.

Did Mr. Haslam ever interfere in respect of your management of the naval maniacs?—Never; he always went round the naval department to see, as I understood, who were proper to be removed to Bethlem, if they had fits, or were sick, or wounded, and so on.

He did not administer medicine to any of those naval patients?—Never to my knowledge; I always had to do that.

He did not recommend any medical treatment for them?—No.

Have you any observations to make upon the evidence of Sir Jonathan Miles?—The only observation which I could have made upon Sir Jonathan Miles's evidence, was with respect to my salary; from the manner in which he stated it, it might be conceived that I was paid £.147 a year for my attention to the naval maniacs only; but it was for the whole, as I have before stated.

In looking over the evidence of Sir Jonathan Miles, it appears that he says, that the cleanly and uncleanly patients are never mixed, either in the sitting or in the sleeping rooms; that they are divided; the cleanly by themselves and the dirty by themselves; and he says besides that, that is uniformly and without exception. Is that a correct statement of the condition of the house within your own knowledge?—It is not so uniformly and without exception, because I have stated in my former evidence, that I answered that question particularly, as far as respected the officers; but that with the seamen, they were generally placed in a part of a large room, that therefore the expression is not correct, with respect to its being uniformly the case.

The seamen were mixed all together. A seaman that was not insensible to the calls of nature, could go into the same apartments with those that were?—The seamen that were not insensible, could certainly go into the apartments where the others were; but they were generally kept separate, in a part of a large room.

Sir Jonathan Miles stated, that the Government patients, under the immediate attention and care of Doctor Weir, were never prescribed for by him, but that his duty consisted in inspecting their clothing and victualling; is that correct?—I have understood that that was his only object; but in one or two instances Doctor Weir has started out of his ordinary path, and particularly in the case of a lieutenant Allardyce, he did prescribe; that was towards the close of my attending Sir Jonathan Miles's house.

Was that subsequent to Sir Jonathan Miles's giving evidence?—No, previously.

It is stated in the same evidence, that about twenty or thirty persons, who are not Government patients, are attended by their own medical men; is that the case?—I believe there might be such a number, but I have known only of very few medical men calling there, and seldom or never to see the paupers; and I never met a medical man there upon the medical relief being given to the paupers; I had exclusive attendance upon them.

A question was asked of Sir Jonathan Miles, whether the parishes were in the habit of sending medical men, and his answer is, certainly, whenever they are wanted. He then goes on to say, that all the parishes send their medical men to attend the paupers; is that correctly stated?—If the parishes sent those medical men, I never knew them to do any thing; I had to give them their medicines, and to pay attention to them every day, and never met a medical man there upon that business.

Mr.
James Birch Sharpe.

It never came within your knowledge, that any medical man came from any parish to attend any pauper?—Never within my own knowledge.

Was Sir Jonathan Miles in the practice of going through the house every day to see the patients in it?—I never knew that practice; I have seen him go occasionally; perhaps I have seen him five or six times, and that is all during my whole attendance go into some of the rooms.

How long did you attend the house?—Five years and a half; and it is only within the last year of my attendance that this has taken place; I never saw him for four years in that house at all.

Do you think that if Sir Jonathan Miles had been in the habit of going through all the bed-rooms twice a week, and personally visiting the apartments of the patients, every day inspecting the provisions, that it is possible you should not have met him once in four years?—Undoubtedly, I must.

Did you go to Sir Jonathan Miles's at the same hour every day or at different hours?—At a particular hour, according to my agreement, and at other times as required. I have been there six or seven times in a day, when I saw any danger.

Did that frequently happen?—It happened in cases of accident; there have been more accidents among the private patients than among the others.

Do you remember a female patient at Sir Jonathan Miles's, commonly called Daphne?—I do remember such a person; I knew her very well during my attendance there.

What particular circumstances do you recollect respecting her?—After I had attended that house, perhaps a year, I made inquiry concerning this woman, because I could not see the least insanity in her conduct; and at last I was informed she was either put there by the Secretary of State or the Privy Council, that she was considered by them as deranged, and that she had been troublesome to the King, in Windsor Park. Now, as I had never seen any misconduct whatever in the woman, nothing whatever which would show the least insanity, I considered it a very peculiar case, that a woman of apparently an amiable disposition, quiet and well-disposed, should be kept in such close and cruel confinement.

Did you see any warrant from the Secretary of State or the Privy Council, to make you suppose that was the case?—I saw no warrant or order whatever; I was merely so informed by Mr. Watts.

Is she in the house still?—She was in August last; I have had no means of knowing since.

How was she confined?—She was kept in a room with patients who paid from 14s. to 17s. a week, and because she was following every person to the door, particularly strangers, wishing to go out, and telling them her case, they would now and then put a straight waistcoat upon her, but I have frequently had it taken off, because there was no cause for it.

What age was this woman?—She is I suppose sixty years of age.

Do you know whether Mr. Haslam ever spoke to her, or was consulted upon her case?—I do not know to a certainty; Mr. Haslam I believe has seen her.

Was she known by any other name in the house but Daphne?—No, she was not.

Do you know how long she had been there?—During the whole of my attendance; Mr. Watts informed me she had been there for seven years.

You have stated, that this woman was confined in a straight waistcoat occasionally; state whether, in your opinion, there was the least necessity for such restraint?—I saw no necessity for it whatever.

What reasons were given to you for such restraint?—That she was troublesome, and always running to the door, soliciting every one for her liberty.

Did you ever hear of any other cause for restraining her in the way you have described?—I never heard of any other cause being stated, nor did I see any cause.

Did you observe any violence in her conduct when she accompanied persons to the door, and requested she might be released from her confinement?—No violence, an earnest solicitation.

Do you know whether she had any support from any quarter, any allowance for maintenance and clothes, and other purposes?—I do not know where the allowance came from, she was dressed decently, and that was all; she always took great care of her own person, and kept herself clean.

Were the other patients that were with her clean?—Yes; there was only one in the room that was not so; she was perfectly an idiot.

How many patients were placed in that room where this woman was?—I cannot say any distinct number; sometimes there may not be more than nine or ten, and sometimes fourteen, varying as patients came in and went out.

Do you know whether this woman was ever visited by any relations or friends?—
I never heard of any person coming to see her that was at all connected with her,
or any stranger.

Mr.
James Birch Sharpe.

Did you ever hear her give any account how she came there, or of the place from which she came, or did you ever hear her speak of any of her connections or friends?—I have heard her say repeatedly, to questions I have put to her, that she knew not the cause of her being brought to such a place, that she thought it was very cruel, that she meant no one any harm; and she has always spoken of the King in terms of warm affection, but nothing leading me to suppose her an insane person.

Did you ever hear of her having been committed as a person wandering about the gates of Buckingham House?—No.

Did you ever hear the nature of the annoyance on her part, of His Majesty or the Royal Family?—Only that she was troublesome.

Did the medical commissioners ever pay attention to her case?—Not to my knowledge.

Has she been pointed out to them?—Yes; I have known of her being pointed out to them, and the information given them as to the manner of her being brought there.

You never learnt from them their opinion, either individually or collectively, as to the state of her mind?—No, I never had any conversation with the commissioners.

Was she employed in assisting at all in the house?—I believe she did a little needle-work.

You never saw her in a state of irritation or violence, or exhibiting mental alienation?—I never saw any appearance of mental alienation; she once had the jaundice, otherwise her health was good.

What was the size of the room in which she was?—It was a large and airy room; it was almost the cleanest room in the whole building, the woman who kept it, kept it very clean.

When you conversed with her about the King or the Royal Family, did she express herself with irritation?—No; she used to say, God bless the King, I never meant to interrupt him, I do not know what I am brought here for; the woman being of such an amiable disposition, I was induced to make inquiry respecting her.

Have you any information to give to the committee respecting the medical treatment of the Government patients, by Dr. Veitch, who is now appointed to attend them on the part of Government?—I think it is important the committee should be informed that Dr. Veitch is a naval surgeon, and has been totally unaccustomed to attend to insane persons; this I should infer from the course which he pursued, but I know it from his own confession, and I think the committee also should know, that the plan which he pursued was one calculated to do much mischief, and did in fact do mischief to many, that not one of them have been cured, though they have mostly been treated in the same way. I should be enabled to give to this committee the particulars of the treatment of every one of these individuals, but Dr. Veitch has got the register which I kept of the sick, and of the medicines given; that register he will not return, and I have made applications for it to the Commissioners for Transports, and they also have refused it to me. I can therefore only say, generally, that he gave mercury in large quantities, threw many into a state of salivation, gave purges, bled them, blistered them, cupped them, and gave an important medicine, the digitalis, in large quantities, indiscriminately, to the high and to the low insane.

Did you see the patients during the progress of this treatment?—Yes; I was required by Dr. Veitch to give the medicines to them myself.

At what period?—From July the 1st to July the 20th, I was required to attend three times a day; I gave the medicines in the morning; I visited at noon, with Dr. Veitch; and came, in the evening, to dress the numerous setons and blisters, and to give other medicines.

Did they produce a visible outward effect upon the appearance of the naval maniacs? Very much so; two or three of the strongest were very much emaciated indeed; and, because they were so reduced and emaciated, it was said they were better; but when the system was given up, when they gave them the ordinary diet, and allowed them to go out, they got as bad as before.

Mr.
James Birch Sharpe.

Did you see any of them in a state of actual salivation? Yes; one poor man, in particular, of the name of Ogilvie; a man of a weak habit of body, and a low class of insanity, was confined many days to his bed in consequence of this salivation.

Was the digitalis given in any considerable quantity?—From ten to thirty drops of the tincture three times a day.

From thirty to ninety drops in the course of one day?—Yes, I have given it myself, by order of Dr. Veitch.

Have you any of the prescriptions by you?—No, they were generally entered short in the register to which I have alluded; but I can bring a number of the pills and powders which were made, which were immense; Dr. Veitch directed, and I wrote it down from his mouth.

Were you in the habit of attending at Mr. Warburton's house, in Hoxton, called Whitmore House?—I had occasion to see a private patient in that house, I think in 1814, or in the early part of 1815.

Is there not a gallery in the first flight of stairs, which has every appearance of convenience and extent?—There is so.

Is that gallery occupied at night as a sleeping room?—Every night it is crowded with beds.

Describe what you have yourself seen when you visited it.—In the evening, I was astonished, on entering that gallery, to find a temporary door and hatchway put up, and an amazing number of beds arranged close to each other, so that there was just room for a man's legs between; they were going to bed, some undressed, some partly undressed.

How many were there in the room?—The number was large; the room was completely crowded.

Did they sleep two in a bed, or had each a bed to himself?—The beds were small; I think they had each one to himself.

Were the womens rooms near to this gallery?—The patient I attended was in a room very near this gallery.

Was the door locked?—It was, and there were two keepers with her, for she was violent.

Was the smell of the room offensive?—It was, from its being too much crowded.

Do you know whether the medical commissioners had it communicated to them, that this was a sleeping apartment?—I am not aware of that.

Do you know whether it is a practice in some of the houses, to turn down beds in some, which were sitting-rooms in the daytime?—I am aware it is done; when I used to attend this house, having occasion to go at seven in the evening, I found the men going to bed in that room, in two instances, and I mentioned the circumstance. The room had its proper number of beds, and a man brought up a bed for himself, and used it there.

So that if the commissioners had the number of beds marked, and the number of patients, they would find that there was not the proper number of beds for patients?—Certainly.

Is it your opinion, that it would be very conducive to the good conduct of these houses, that the commissioners should visit them at other hours than the daytime?—Certainly, I should conceive it would prevent this system being carried on, which must be very detrimental to health.

Do you know any thing of the state of that house since; whether the system has continued, or not?—I do not; I have not had occasion to go up stairs.

What was the average number of seamen at Hoxton?—I do not know; but it appears upon the report of the last Session.

That return does not include the Greenwich pensioners and artillerymen?—It does not.

Veneris, 22^o die Martii, 1816.

The Honourable HENRY GREY BENNET, in The Chair.

James Veitch, M.D. again called in, and Examined.

WHAT are you?—I am Surgeon to the Institution at Hoxton. I beg leave to deliver in a List of Lunatic Seamen and Marines, &c. in the house at the time of my appointment on the 27th of June 1815, and since.

Dr.
James Veitch.

[It was delivered in and read, as follows:]

A LIST of LUNATIC SEAMEN, MARINES, &c.

NAMES.	Quality.	When received.	From whence.	Died.	Discharged.
Richard Simpson	Seaman	Sept. 5, 1785	Bethlem.		
Peter Stuart	- ditto	Feb. 9, 1792	- ditto.		
Patrick Grogran	- ditto	July 20, 1794	- ditto.		
Jos. Cotes	- ditto	June 2, 1795	- ditto.		
John Brier	- ditto	June 18, —	H.M.S.Brilliant.		
Patrick Emeson	- ditto	Aug. 11, 1796	— Stately.		
Jos. Towers	- ditto	Feb. 11, 1797	— Inconstant.		
John Lannon	- ditto	July 19, —	— Hester.		
James Brickley	- ditto	Oct. 4, —	Bethlem.		
John Hill	- ditto	Nov. 4, —	H.M.S.London.		
Bar. Warner	- ditto	May 16, 1798	— Daphne.		
James Clare	- ditto	July 27, —	— Caton.		
K. Nelson	- ditto	Aug. 18, —	— Alfred.		
J. Micklejon	- ditto	Nov. 14, —	— Thetis.		
William Owen	Carpenter	Mar. 27, 1800	Arrow.		
Richard Jackson	Seaman	July 19, —	Iphigenia.		
James Appleby	- ditto	Oct. 2, —	Bethlem		July 3, 1815.
Francis Vetch	- ditto	- - -	- ditto.		
John Guillot	- ditto	Oct. 9, —	- ditto.		
William White	Marine	Feb. 6, 1801	- ditto.		
Leo. Collyer	Seaman	Mar. 26, —	H.M.S.Winchelsea.		
Samuel Gibson	- ditto	Nov. 26, —	Bethlem.		
Peter Jones	- ditto	Dec. 26, —	H.M.S.Bellerueux.		
Ross Morgan	Lieutenant	Mar. 28, 1802	Portsmouth Division.		
Joseph Wendower	Seaman	June 19, —	Liberty.		
James Browne	- ditto	Nov. 5, —	Carnatic.		
Frederick Gode	- ditto	Apr. 7, 1803	Bethlem.		
William Measey	- ditto	— 15, —	- ditto.		
K. Clark	- ditto	— 20, —	- ditto.		
R. Curson	- ditto	Oct. 29, —	Sal. del Mundo.		
Robert Hutton	Mariner	Nov. 4, —	Bethlem.		
Alexander Murray	Lieutenant	Nov. 18, —	Portsmouth Division.		
Samuel Pitt	Surgeon	Apr. 28, 1804	Bever.		
Tit Allardice	Lieutenant	May 1, —	Excellent.		
Daniel Gilmore	Seaman	Nov. 23, —	Foudroyant.		
William Chilton	- ditto	Oct. 2, 1805	Bethlem.		
Charles Scroder	Lieutenant	Nov. 28, —	Waterford.		
R. M. Gilpin	Master's mate	Feb. 26, 1806	Illustrious.		
John Glassford	Seaman	July 2, —	Bethlem.		
William Farley	- ditto	— 18, —	- ditto.		
Joseph Furmidge	- ditto	Sept. 19, —	- ditto.		
Thomas Hammond	- ditto	Jan. 29, 1807	- ditto.		
William Williams	- ditto	Mar. 18, —	- ditto.		
James Martin	Surgeon	June 21, —	Nimrod.		
Garnet Lambe	Seaman	Oct. 24, —	Bethlem.		
Jean Soult	- ditto	Nov. 2, —	Chiffon.		
Patrick Stafford	- ditto	Jan. 27, 1808	Bethlem.		
John Donahoe	- ditto	Mar. 18, —	- ditto	Jan. 5, 1816.	
Evan Evans	- ditto	May 5, —	- ditto.		
Daniel Spiers	- ditto	July 1, —	- ditto.		
Dominick Saiton	- ditto	— 21, —	Polyphemus.		
William Kiddall	- ditto	May 3, 1809	Bethlem.		
John Price	- ditto	— 23, —	- ditto.		
James Bedingfield	- ditto	Oct. 18, —	- ditto.		
Edward Dyson	- ditto	Jan. 4, 1810	- ditto.		
James Davidson	- ditto	Feb. 6, —	- ditto.		
J. Atkins	- ditto	Mar. 2, —	- ditto.		
Alexander Golwell	- ditto	May 2, —	- ditto.		
Thomas Wright	- ditto	— 3, —	- ditto.		
John Wing	- ditto	— 22, —	- ditto.		
Alexander Campbell	- ditto	June 6, —	- ditto.		
John Bevan	Lieutenant	— 18, —	Ulysses.		

NAMES.	Quality.	When received.	From whence.	Died.	Discharged.
Dania Fozey - - -	Seaman - - -	July 26, —	Bethlem.		
John Hartwell - - -	- ditto - - -	Aug. 22, —	- ditto - - -		July 3, 1815.
James Allen - - -	- ditto - - -	Sept. 29, —	Gladiator.		
H. M'Dowall - - -	- ditto - - -	Oct. 16, —	Bethlem.		
George Griffiths - - -	- ditto - - -	Nov. 8, —	- ditto.		
Robert M'Henry - - -	- ditto - - -	Jan. 11, 1811	- ditto - - -	Oct. 4, 1815.	
W. H. Farr - - -	Midshipman	— 25, —	St. Luke's		
John M'Guire - - -	Seaman - - -	Feb. 6, —	Bethlem - - -	Jan. 25, 1816.	
Thomas Williams - - -	- ditto - - -	— 28, —	- ditto.		
K. Waser - - -	- ditto - - -	Apr. 10, —	- ditto.		
Richard Jenkins - - -	- ditto - - -	May 29, —	- ditto.		
John Lysell - - -	- ditto - - -	June 5, —	- ditto.		
W. H. Hughes - - -	- ditto - - -	— 18, —	- ditto.		
Daniel Studd - - -	Mariner - - -	- - -	- ditto.		
Richard Ahern - - -	- ditto - - -	— 25, —	- ditto.		
P. M. Cary - - -	Seaman - - -	Aug. 14, —	- ditto.		
William Ogilvey - - -	- ditto - - -	— 28, —	- ditto.		
N. Lunnun - - -	- ditto - - -	Sep. 17, —	- ditto.		
John M'Kay - - -	- ditto - - -	Oct. 30, —	- ditto.		
Isaac Huston - - -	- ditto - - -	Nov. 20, —	- ditto.		
Thomas Spencer - - -	- ditto - - -	Dec. 26, —	- ditto.		
John White - - -	- ditto - - -	Feb. 28, 1812	- ditto.		
Barnard Wess - - -	Mariner - - -	- - -	- ditto.		
Frederick Sheik - - -	- ditto - - -	April 23, —	- ditto.		
George Barker - - -	- ditto - - -	May 14, —	- ditto.		
Richard Easton - - -	Boatswain - - -	— 25, —	San Nicholas.		
John Hanton - - -	Seaman - - -	July 22, —	Bethlem.		
Thomas Parker - - -	Mar. - - -	— 30, —	- ditto.		
Joseph Elson - - -	Seaman - - -	Sept. 9, —	- ditto.		
Patrick Fitzpatrick - - -	Mar. - - -	- - -	- ditto.		
Joseph Holloway - - -	Seaman - - -	— 22, —	- ditto.		
James Walker - - -	Mar. - - -	— 30, —	Batavia.		
N. Morrison - - -	Seaman - - -	Nov. 28, —	Bethlem.		
Law Kettle - - -	- ditto - - -	Dec. 17, —	- ditto.		
John Le Songe - - -	- ditto - - -	— 31, —	- ditto.		
Patrick Pendergrass - - -	- ditto - - -	Jan. 7, 1813	- ditto.		
Gyles Paris - - -	Gunner - - -	Feb. 9, —	Nero.		
James Donaldson - - -	Seaman - - -	— 25, —	Bethlem.		
George Mace - - -	Qu' Master - - -	May 4, —	Sal. del Mundo.		
William Jones - - -	Seaman - - -	— 6, —	Bethlem - - -	Dec. 18, 1815.	
David Buxton - - -	- ditto - - -	- - -	- ditto.		
Daniel Geary - - -	- ditto - - -	— 19, —	- ditto.		
George Smit - - -	Cor. Mar. - - -	June 17, —	- ditto.		
Richard Harris - - -	Gunner - - -	July 1, —	Delahoyd.		
Andrew Shepani - - -	Seaman - - -	— 7, —	Bethlem.		
John Love - - -	- ditto - - -	- - -	- ditto - - -	Jan. 23, 1816.	
James Jeffery - - -	Mar. - - -	— 27, —	- ditto.		
John Hewett - - -	Seaman - - -	- - -	- ditto.		
Samuel Vanderling - - -	- ditto - - -	Aug. 13, —	- ditto.		
Jos. Rundall - - -	- ditto - - -	Sept. 28, —	- ditto.		
Noah Bird - - -	- ditto - - -	Nov. 9, —	- ditto.		
A. H. Weaver - - -	- ditto - - -	— 18, —	Marlborough.		
James Wild - - -	- ditto - - -	— 23, —	Bethlem.		
Neil Angus - - -	- ditto - - -	Dec. 16, —	- ditto - - -	Feb. 12, 1816.	
Patrick Walsh - - -	- ditto - - -	Jan. 5, 1814	- ditto.		
H. C. Bradford - - -	Purser - - -	Feb. 7, —	Nassau.		
John Evans - - -	Captain - - -	— 12, —	Recruit - - -	Mar. 10, 1816.	
William Matters - - -	Mariner - - -	— 19, —	Bethlem.		
James Cardiff - - -	Seaman - - -	- - -	- ditto.		
John Brady - - -	- ditto - - -	— 23, —	- ditto.		
A. Thompson - - -	Carpenter - - -	Mar. 8, —	Prothée.		
Robert Squires - - -	Seamen - - -	— 26, —	- ditto.		
William Holwood - - -	- ditto - - -	May 11, —	- ditto.		
C. M'Callister - - -	- ditto - - -	June 3, —	- ditto - - -		Sept 25, 1815.
Richard Rick - - -	- ditto - - -	July 9, —	- ditto.		
Duc. Lecouse - - -	- ditto - - -	- - -	- ditto.		
Col. Angus - - -	- ditto - - -	July 21, —	- ditto.		
William Kinder - - -	- ditto - - -	- - -	- ditto.		
Thomas M'Donald - - -	- ditto - - -	Sept. 2, —	- ditto.		
Ant. Lemart - - -	- ditto - - -	- - -	- ditto.		
John Sherry - - -	- ditto - - -	Sept. 10, —	Valiant - - -		July 1, 1815.
John Williams - - -	Mar. - - -	— 29, —	Bethlem - - -	July 8, 1815.	
John Robinson - - -	Seaman - - -	- - -	- ditto.		
Lawrence Barrell - - -	- ditto - - -	Oct. 14, —	- ditto.		
John Lee - - -	- ditto - - -	— 21, —	- ditto.		

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NAMES.	Quality.	When received.	From whence.	Died.	Discharged.
John Pindall - - -	Seaman - -	Oct. 28, 1814	Bethlem.		
John Casey - - -	- ditto - -	Dec. 6, —	- ditto.		
Peter Rafferty - - -	- ditto - -	— 22, —	- ditto.		
Thomas Butler - - -	- ditto - -	Jan. 4, 1815	- ditto.		
Nat. Bunis - - -	- ditto - -	Feb. 1, —	- ditto.		
Mic. Gray - - -	- ditto - -	Mar. 2, —	- ditto.		
Thomas Williams - - -	- ditto - -	Apr. 7, —	- ditto.		
Nat. Buck - - -	- ditto - -	— 12, —	- ditto.		
Richard Biggary - - -	- ditto - -	— 18, —	- ditto.		
A. M' Dougal - - -	Lieutenant -	May 1, —	Glasgow - -		Sept. 25, 1815.
Jos. Gamblett - - -	Seaman - -	— 19, —	Sussex.		
Phil. Argo - - -	- ditto - -	June 16, —	Severn - -		July 1, 1815.
Ed. Sheppa - - -	- ditto - -	— 23, —	Bethlem - -		Mar. 15, 1816.
Darby Sheer - - -	- ditto - -	— 29, —	Pylades - -		July 22, 1815.
Stephen Moore - - -	- ditto - -	July 12, —	Argonaut - -		— ditto —
William Rolls - - -	- ditto - -	— 21, —	- ditto - -		Aug. 5, —
Wal. Henry - - -	Marine - -	— 24, —	Gracious - -		July 29, —
William Marchant - - -	Surgeon - -	— 28, —	St. George - -		Sept. 25, —
Tim. Murphy - - -	Marine - -	— 30, —	Batavia.		
Thomas Stephens - - -	Seaman - -	Aug. 10, —	Argonaut.		
Pet. Adams - - -	- ditto - -	- - -	- ditto.		Aug. 31, 1815.
J. A. Cook - - -	- ditto - -	Aug. 18, —	- ditto - -	Feb. 10, 1816.	
John Reid - - -	- ditto - -	— 23, —	- ditto.		
Jaques Martin - - -	- ditto - -	- - -	- ditto.		
William Harris - - -	Marine - -	Aug. 29, —	- - -		Dec. 5, 1815.
William Atkins - - -	Qu' Master -	- - -	Manly - -		Sept. 7, —
Sam. Billet - - -	Marine - -	Sept. 12, —	Niger - -		— 21, —
R. Chapman - - -	Carpenter - -	- - -	Minden - -		Feb. 24, 1816.
John Owen - - -	Seaman - -	Sept. 13, —	Bethlem.		
John Appleby - - -	- ditto - -	— 25, —	Batavia.		
John Hartwell - - -	- ditto - -	- - -	- ditto.		
Thomas Farrell - - -	- ditto - -	Oct. 4, —	Navy Office - -		Oct. 19, 1815.
James Stafford - - -	- ditto - -	— 21, —	Rifleman - -		Nov. 30, —
Robert Bulger - - -	- ditto - -	Nov. 2, —	Bethlem.		
James Clarke - - -	- ditto - -	— 10, —	Hindustan - -		— 16, —
Antoin Mends - - -	Seaman - -	— 16, —	- ditto - -	Jan. 6, 1816.	
John Simpson - - -	Lieutenant -	— 28, —	Plymouth.		
Lewis Gray - - -	Seaman - -	— 30, —	Bethlem.		
Thomas Chinnery - - -	- ditto - -	Jan. 10, 1816	Plymouth - -		Jan. 25, 1816.
James Bradshaw - - -	- ditto - -	Feb. 8, —	- - -		Feb. 22, —
John Smith - - -	- ditto - -	— 14, —	Queen Charlotte - -		Mar. 7, —
John Wheeler - - -	- ditto - -	Mar. 7, —	Bethlem.		
Walter Mitchell - - -	- ditto - -	— 19, —	- ditto.		

WHAT is the present state of that establishment; is it different from what it was at your last examination?—It is certainly improved.

In what respect?—In cleanliness and classification, as far as the Institution will admit of it.

Have the cleanly and quiet patients at the present moment a free admission into the rooms where the dirty and noisy patients are?—From the imperfect character of the Institution, such intercourse in reality cannot be altogether obviated.

Are the patients under your care mixed with the paupers as formerly?—No, certainly not.

Under whose care are the Greenwich patients placed?—They are under the care of a private practitioner.

Paid by the Hospital?—Paid, I imagine, by the Hospital.

Do you know his name?—Major, I think.

Are they mixed with the Chelsea and Artillery, and other Lunatics that are placed there?—I do not know; I direct my attention exclusively to the Naval Lunatics; were I to interfere with the other departments it might be conceived to be improper.

Then you mean to state, that the Naval Lunatics are kept perfectly distinct from the Chelsea, the Artillery, and the Pauper Lunatics?—I have, from the time of my appointment, directed that they should be kept perfectly distinct.

They were not distinct when you first took them in charge?—That strict adherence to the distinction of the Naval Lunatics was not observed on my first visiting that Institution; at all events, it was by no means so pointed as at present.

Since

Dr.
James Veitch.

Dr.
James Veitch.

Since you have been at the head of that establishment, have you been successful in your practice as to the relief of insanity; and can you state the number of persons discharged since you have been at the head of the establishment?—It is to be observed, that the institution at Hoxton is principally occupied by Lunatics who have been previously at Bethlem, and have been discharged from that hospital as incurable. Few of them have been less than two years at Hoxton; consequently their cases are not so susceptible of assistance from the powers of medicine as in its early stages. It is also the practice of the institution, (which I have exceedingly to regret) when patients are received with recent disease, to transfer them directly to Bethlem.

From the ships or hospitals where they are first affected?—They are sent from the shipping to the hospital of the port at which the ship arrives; from thence they are transferred to Hoxton; and from Hoxton they are removed to Bethlem, if Mr. Haslam conceives that he is likely to effect a cure. All whose cases are desperate are left under my care; sixteen patients, officers and seamen have been received from Haslar and other hospitals, five of whom have been left in my charge, and out of that five I have cured three officers and one seaman; I have also succeeded in curing two of those patients sent from Bethlem as incurable, so that I have discharged six patients cured of Lunacy, during the nine months I have had charge of the asylum at Hoxton; and I am strongly inclined to believe, that the cure will prove permanent; none of them have been returned.

How long is it since the first was discharged?—It is several months since.

It has been stated to the Committee, that your medical treatment has been of a nature extremely violent; that you have been in the practice of salivating patients by a great use of mercury, and by giving them digitalis, and other powerful medicines; is that the case?—It is utterly false; deliberately false.

Will you take it upon yourself to say, that you have not thrown any patient into a state of salivation by the use of mercury, given to him for the purposes of medical treatment, for his insane state of mind?—The mouth of several of the insane patients has been affected with mercury, and to that circumstance I have no hesitation in ascribing, in a great measure, the relief which those men have obtained.

Is not this second answer somewhat contradictory to your former answer?—In my former answer, my object was deliberately to controvert any thing like a harsh or injudicious use of medicine.

You acknowledge, then, that you have been accustomed to administer mercury for the cure of mental derangement, and to the administration of that mercury you attribute very beneficial effects?—Yes, I do; it is true that I have used mercury with a view to the relief of insanity, and also of corporeal disease; but I deliberately controvert every thing like a harsh or injudicious use of the remedy.

Have you been accustomed to purge, bleed, cup or blister, to any excess?—I have been in the habit of bleeding and blistering; and four or five have been cupped during the period I have been at the Institution; but every thing like excessive or violent use of these remedies I deny; they have been directed with the utmost circumspection, after a most minute and careful investigation of the nature of the cases.

Have you used those methods, or any of them, at stated periods of the year?—No; I have been guided by the immediate state of the patient. I have no periodical remedies. May I be allowed to state, that a man of the name of Harris, who was rejected by Mr. Haslam as a person whom he conceived incurable, and unfit to be received into Bethlem, owes his recovery to bleeding and the use of mercury. He came to the Institution in the most disgusting and disagreeable state that a maniac could possibly appear in; voiding his fæces and urine involuntarily; and mischievous at the same time; he owes his recovery to the use of mercury and to blood-letting, carried to a considerable extent; he was young, and of a vigorous habit of body.

To your practice, in short?—Yes.

Do you happen to know that the use of mercury, as a medical remedy for insanity, is common in other establishments?—I should rather think not; but on men so desperately afflicted, consigned as it were to time for a remedy, any thing that is not likely to do an injury, I conceive myself justifiable in trying.

Did you ever reduce any of your patients, that were in a state of violent irritability, so low that you were obliged to abandon your plan, because you feared the person was not able to exist under the treatment?—Nothing of the kind ever occurred at the institution at Hoxton.

Will you state to the Committee on what principle you use mercury for the purposes of medical cure, in cases of insanity?—The disease is often connected with corporeal affection; with organic derangement of the visceral system; with chronic congestion of those organs, and even of the brain itself; and looking at the state of the brain as unfolded by dissection, it struck me that mercury was a remedy likely to be useful, by reasoning *a priori*, and my experience has justified the conclusions at which I arrived.

Were

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Were you accustomed to give the digitalis in any quantity?—I have used it, but with the utmost attention and care.

In what quantity have you ever used it?—I have seldom carried it beyond the extent of sixty drops in a day, which is very inconsiderable, and from which I have derived no use at all in mania.

That is the utmost you have used?—I seldom exceeded that; I do not think I have exceeded that in the course of four-and-twenty hours; I am positive I have not.

Have you ever tried any sedative medicines to any considerable extent?—I have very little confidence in them; I have tried the varied sedative medicines, but have seldom pushed them to any extent.

Have you any means of giving occupation or employment, either in the way of labour or recreation, to the seamen that are under your care?—It is utterly impossible from the limited space of the ground around the Institution; that is one of the greatest defects attached to the Institution, the want of the means of giving exercise to the patients confined there.

Is it then your opinion, that in any new establishment which might be projected for the care of this unfortunate class of men, airing grounds, and means of occupation, employment and recreation should be given?—They will be of the most essential benefit; without such aids as are alluded to in the question, the powers of medicine will be considerably diminished.

Whether applied to the body or the mind, you mean?—They should be so employed as to act on both mind and body.

In what manner are the naval patients brought up from the country and delivered into your care at Hoxton?—I believe they are brought up in a chaise.

Can you take it upon yourself to say, that since you have had the charge of that Establishment, none of them have been brought up on the outside of a stage coach, or by any other public conveyance?—I am not aware of any thing of the kind having taken place.

By whom were you appointed?—By the Transport Board.

How long have you been in the Navy?—I have been about twenty-four years a surgeon of the Navy.

Have you ever given your attention to this particular malady before your present appointment?—In the course of the varied situations which I have filled, that of surgeon of Plymouth Hospital, surgeon to the Royal Naval Hospital at Antigua, and surgeon to the prisoners of war at Norman Cross, repeated instances of maniacal disease have become the object of my care; but till lately my attention has not been exclusively directed to such objects.

How many patients have you ever had under your care at one time at any of those places; Plymouth for instance?—In fact they only remained under my care till they could be sent to Hoxton.

How many passed through your hands at Plymouth, in the course of twelve months?—I cannot positively say; after recovering from fever, and other acute diseases, it sometimes happened that patients were attacked with insanity; and when that happened, they remained under my care till they were removed to Hoxton.

Are cases of Lunacy common in the navy?—By no means; I think in the course of my naval practice the number has not been great which I have met with.

Do you suppose you have the care now of all the insane seamen, or are they sent to any other place?—There is no other institution.

Then you have the care of the whole?—Yes, I have the care of the whole who are the objects of attention on the part of Government, and who are not on board of ship, at our hospitals, or in Bethlem.

How many have you?—I have 147 this morning under my care.

Can you say how many Greenwich hospital men, marines, and Chelsea men, are insane?—I cannot; I imagine there may be about 30, but Mr. Watts, who is the superintendent of the institution, is here, and he will be able to answer the question.

Have you brought with you the registry of the prescriptions for which the Committee made an order the last day of their meeting?—I received no order to bring such register, but I am perfectly ready to lay it before the Committee.

Mr. John Watts, called in, and Examined.

WHAT is your situation?—Superintendent at Hoxton.

Do you act under the trustees, or under Sir Jonathan Miles?—I act under Sir Jonathan now.

How long have you so acted under him?—A year and a half, or perhaps two years.

Dr.
James Veitch,

Mr.
John Watts.

Mr.
John Watts.

What salary used you to allow on the part of the trustees of Sir Jonathan to Mr. Sharpe as surgeon?—147*l.* a-year.

He had then the care not only of the private patients of the house, but of the Government patients who were under your charge?—Yes; the whole.

Did he find medicines as well as medical attendants?—Yes; not poultices nor lint, nor those kind of things, but all kinds of drugs.

What was your establishment allowed by Government per head, on account of medicines?—Four pence for a week.

Which, on the average number of patients, would amount to from 100*l.* to 120*l.* a-year?—Perhaps to 100*l.*; it included porter, wine, and other little things.

Can you state to the Committee in what manner the seamen, who were removed from Haslar hospital, or from other places to your establishment at Hoxton, were conveyed?—I believe, principally by coach.

Has it been the case that these unfortunate Lunatics were chained on the outside of the coach, and in that manner sent up travelling by night to the establishment?—Never, to my knowledge.

Can it have happened without your knowledge?—Yes; it might have happened without my knowledge.

Can you say that the practice has not been to send them up on the outside of the coach in the day time, during the summer; and in the night time, during the winter?—In the winter I think they used to come to our house about nine o'clock in the evening, I am not certain, but I think I am correct; in the winter I think they used to come in the evening; they were always brought to our house in a hackney coach.

Do you recollect any case in which a person had suffered so from the inclemency of the weather, that he died a few hours after his arrival?—Never to my knowledge.

Do you recollect a man of the name of Murphy, who was sent from the Batavia hospital ship, and was at your house in August last?—We had two of that name, Timothy, and John; Timothy was the person who came from the Batavia hospital ship, he has been two or three times at our house.

Was he sent to your house in a state, in which the muscles of his arms were literally cut through to the bone, in consequence of his having being manacled by ropes?—They were very bad.

And he was in that manner sent up from the country?—Yes.

His arms were very badly cut?—Yes.

Do you know what was the cause of those cuts?—Only from suggestion, that the patient was very violent, and had been trying to get loose; I am not certain that that was the cause, but I rather think it was.

Do the cicatrices of the wounds still remain?—I have not noticed the man for months; he is walking about apparently well; I have not looked at him for several months.

Do you remember any other cases in which the arms of the patients were cut by the manner in which they were fastened, in order to bring them securely to your house?—Never so bad as him; I have seen slight marks of the strings of the strait-waistcoat or ropes, but not any thing serious like Murphy.

Did Murphy's arms require surgical attendance?—Yes.

For what length of time?—That I cannot say; he was attended by Mr. Sharpe; he was very much deranged for two or three weeks.

Was he a very violent maniac when delivered to you?—He was.

Does Sir Jonathan Miles often personally inspect the establishment at Hoxton?—He is there in general every day except Sundays.

For how long a time has he done that?—For the last year and a half or two years.

Prior to that, used he to inspect the establishment?—Not so frequently.

When he personally visits this establishment, does he inspect every room?—I never go round with him, I am always called away; I just walk through the gate, and I never go with him.

To the best of your belief, he goes through every apartment in the house every day?—He goes into every house; but if I were to say he goes into every apartment, I should say more than I ought, perhaps.

He goes into the parlours?—Yes, and into the bed-rooms.

Do you think he visits all the bed-rooms once or twice a week?—I cannot say, never being with him; I have heard he has been up stairs; whether he goes into every room I do not know.

Do

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Mr.
John Watts.

Do the parishes, who send their paupers to your establishment, send medical men too to attend them?—Sometimes, and sometimes not.

What parishes are accustomed to send their insane poor to you?—St. James's and St. Margaret's, Westminster.

Which of those parishes are accustomed to send medical men?—Neither of them.

Then, what parishes are they that send medical men?—Where we have had one, perhaps, or even two patients; when we have a larger number it is very seldom that they send their own medical men.

Then it is not correct that all the parishes send their medical men to visit their insane paupers?—No.

How many paupers have you at present in your establishment?—In the house we have in the whole 486.

Are they principally London paupers, or country paupers?—Principally London paupers; the number of pauper men, including Greenwich and Chelsea, is 146.

Are the pauper men mixed with the Greenwich and Chelsea patients?—Part are, and part not; the Greenwich are separated from the paupers.

But the Chelsea are not?—Not all of them.

Are the Greenwich patients permanently kept separate from the pauper patients?—Yes.

How long has that practice been adopted?—Three or four years, or it may be five years.

Was it not always understood by Dr. Robertson, the inspecting physician, that the Greenwich patients were never mixed with the pauper patients?—Do you mean in the day time, or in the night?

In the day time?—Not till within these four or five years; he understood they were with the parish paupers before that time, in the day-time; they always had sleeping apartments to themselves.

Then you state that it was a circumstance that has never happened, that the pauper patients have been turned out of the yard at the period that Dr. Robertson was in the house prior to his examination, and Dr. Robertson informed that the yard was exclusively given to the Greenwich patients?—He has been in the yard where his patients are in the day-time; and he has been told that that place was appropriated for his patients, and about ten or twelve of the quiet Chelsea patients.

You will then take it upon yourself to say, that it has never occurred, that upon Dr. Robertson coming to inspect these patients, the pauper patients were turned out of the yard, and the Doctor told that that yard was exclusively given to the Greenwich patients?—Never, to my knowledge.

Can you take upon yourself to affirm of your own knowledge, that it has not been so?—Yes; I mean to say this, that the parish patients never were with the Greenwich patients, and never were turned out; they never were with them for the last five years, or thereabouts; prior to that they were in the yard together. For the last five years no parish patient was ever permitted to go in there.

Have you then ever witnessed the pauper patients turned out of that yard, for the purpose of showing Dr. Robertson that that yard was exclusively appropriated to the Greenwich insane?—I can answer that in this way, the parish paupers were never permitted to go into that yard during the last five years; formerly the Greenwich patients and the Parish patients were in the yard all together.

Then at this present moment you mean to state, that neither the Greenwich patients, nor the Chelsea, nor the artillerymen, nor the seamen, are mixed with the paupers?—Yes, the artillerymen are mixed with the parish paupers.

But the others are not?—The others are not, except some of the Chelsea patients; some of the Chelsea patients are mixed with the paupers.

Then the Committee are to understand that the Chelsea and artillerymen are mixed with the paupers, but the Naval and Greenwich Lunatics are not so mixed?—They are separated.

How long has Dr. Robertson been in attendance?—Many years, but I cannot say how long.

Is it more than five years?—A great many more.

Then you cannot take upon yourself to say, that previous to the five years of which you have been speaking, the pauper patients may not have been turned out of the yard, when Dr. Robertson has come to visit the Greenwich Hospital patients in the manner alluded to in the questions before put?—I should think not, for there was no where to put them.

You cannot take upon yourself to say, that previous to the five years of which you have been speaking, the pauper patients may not have been turned out of the yard when Dr. Robertson has come to visit the Greenwich Hospital patients, in the manner alluded to in the questions before put?—They never could have been turned

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John Watts.

turned out; it is impossible that the parish patients could have been turned out prior to the five years, there were only two yards, one for the sailors, and one for the others.

You have no place to turn them into?—No.

You cannot take upon yourself to say, that previous to the five years of which you have been speaking, the pauper patients may not have been turned out of the yard when Dr. Robertson has come to visit the Greenwich Hospital patients in the manner alluded to in the questions before put?—No, they were never turned out; when Dr. Robertson used to come frequently, the Greenwich patients were brought up and placed up by a long wall, where he saw them; he did not always go into the yard where they were, they were brought up to him, which they are now sometimes.

In the same yard in which the Greenwich, artillery, and Chelsea patients were kept, were there not prisoners, foreign, as well as those from Newgate?—The foreign prisoners were with the sailors; the Newgate prisoners were in the yard with the parish patients.

—Were there not the Newgate prisoners with the Chelsea and artillery patients? Yes.

Were you at Hoxton when the Commissioners made their last visit there?—Yes.

You were present?—Yes.

When did that occur?—I cannot charge my memory.

What time did that visit employ?—About an hour and a half, or two hours, I think.

They see the whole every time they come?—Yes.

And they see the bed-rooms and every accommodation?—Yes.

And that work employed from an hour and a half to two hours?—Yes.

And they saw the bed-rooms and all the accommodation the house affords?—They went into every room, I believe.

Do you recollect whether they did it in the day-light, or in the dusk?—In day-light.

Have you a female patient of the name of Daphne in your house?—Yes.

How long has she been there?—Seven years next June or July.

Where did she come from?—Bethlem.

Who sent her to you?—The Secretary of State's office.

For what was she sent?—On account of her being troublesome to some of the Royal Family, so I was told.

Was she insane?—Yes.

Has she been insane from that period to the present moment?—Yes; I believe she is now.

What is the nature of her insanity?—Three months ago I had a conversation with her, and she said she heard voices at Windsor; there were several other subjects mentioned; she said she would go to Windsor and turn those people out, that it was her house, and they had no right there.

Is she quiet?—Yes.

Has she always been quiet?—Yes.

Have you ever been obliged to put her in confinement?—Yes.

For what?—For attempting to run out.

Is she irritable?—Very.

Anxious to get from the place?—Yes, very.

Do you know who she was?—I think her husband was a shepherd.

What is her name besides Daphne?—Mary, I think.

Have the medical Commissioners ever examined her, as to the state of her insanity?—They have seen her, and spoken to her.

Do you happen to know, whether they consider her insane?—I suppose they consider her insane, by not giving directions for her being removed.

Is she uniformly insane?—I think she is.

Will you take upon yourself to say, that during the seven years she has been confined, she has been an insane person?—I think I can.

From your knowledge of what has passed between the medical Commissioners and that woman, should you say that their opinion of her insanity was derived from their own observation, or from the report you made of it?—I should think from their own observation; they never had any opinion about her.

You have said, that you have been obliged to put this woman under some restraint, in consequence of an attempt to run away?—Yes.

What

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John Watts.

What is the nature of that restraint?—She was so troublesome to the servants they could not get away from her, she would tear the clothes off their backs; we have had a strait-waistcoat on sometimes; sometimes she has been fastened by the leg in her sitting-room.

Do you think it was absolutely necessary because she attempted to run away, to put on the strait-waistcoat, or chain her by the leg?—I do.

Do you think that a more mild mode of restraint would not have been sufficient?—No; you could not reason with her; she was so desirous to get out, there were obliged to be two or three woman to hold her.

How long has she been confined at a time in the strait-waistcoat in consequence of her attempting to get away?—I cannot charge my memory, it may be a day, or it may be two or three days running, or it may be only an hour.

Confined down?—No, she never was confined down when she had the strait-waistcoat on.

How long has she been chained by the leg; a week, or a month?—Perhaps a week.

Not a month?—Not a month regularly, I think.

Has she been confined by the leg lately?—I have seen her every day, and I have not seen her confined.

Has she been confined within the last twelvemonth?—Not that I know of; I have seen her every day, and she has been walking about.

Are any of the patients confined by the leg, or put in a strait-waistcoat, without your special directions?—Yes; when a patient has been violent, and has fought, they instantly put either man or woman under restraint; and the first time I see the patient, I inquire what he has been doing, and they either continue the confinement, or let him loose; that depends on my directions.

Has this woman been in the habit of fighting, or striking any of the servants?—No, I do not think she has; only in getting hold of them, and throwing them down, and trying to get out, they used to fall down two or three together.

Then your servants have liberty to chain this woman down, without consulting you on the subject?—Yes.

And without making any report to you on the subject?—Yes.

Does she employ herself in working?—Very little; she does a little.

What does she do?—Wander about and sit over the fire.

And try to get out?—Every time the door opens she tries to get out.

Has she any relations who come to see her?—A son.

What is his name?—I do not know his christian name, Daphne.

Do you know his profession, or where he lives?—He is a labouring man, and lives at Ealing, I think.

Who pays for her?—Mr. Pollock.

Upon what allowance is she kept?—I think it is 50*l.* a-year to find every thing.

That is paid to Sir Jonathan Miles?—Yes.

Does her son acquiesce in her being in a state of insanity?—I think he does.

Is she confined in a room in which there are any patients who are insensible to the calls of nature, or who may be considered as violent patients?—I think not.

How many patients sleep in the room in which she sleeps?—Upon my word I cannot answer that question.

How many do you think?—There may be four or five.

Are they clean patients?—All clean.

Are they in separate beds?—We have twelve double beds for women.

Does she sleep in a double bed?—I think she sleeps by herself.

In the apartment she uses as a sitting-room, are there any dirty patients?—Not one.

Does Mr. Haslam attend your establishment?—He comes to see the Government patients, those that are fit to go to Bethlem.

Has he any private practice in your house?—None whatever.

Had he not some time back?—Never, I believe; I do not recollect his ever prescribing for a patient.

Has he not visited patients there by desire of friends?—Yes.

Did he ever receive any salary from Sir Jonathan Miles's house?—Yes.

How much, and when?—He receives 100*l.* a-year.

Now?—Now; formerly he received 40*l.* a-year; and it was increased from 40*l.* to 60*l.*, and from 60*l.* to 100*l.*

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What does he do for that salary?—It is for his recommendation of patients to the house.

Then the Committee are to understand that it is in the nature of a fee for the recommendation of patients to the establishment at Hoxton?—Yes.

Does he often attend?—Once or twice a-week.

Visiting the Government patients?—Yes; only those that go to Bethlem.

Can you inform the Committee how many Greenwich hospital patients are in the house?—Thirty-four men, and one woman.

What was that woman?—A nurse at Greenwich hospital.

Do you know how many marines are included?—I do not know whether they are marines or sailors.

They may be either one or the other?—Yes; I do not know which they are.

Do you know the number of seamen?—130 seamen, I think, (whether there are 131 I am not quite sure) and 17 Officers.

Do you believe that most of the insane seamen from the fleet are at your house?—They are not at any other house I should think, except Bethlem.

Mr. James Birch Sharpe, again called in, and Examined.

Mr.
James Birch Sharpe.

HAVE you any thing to state to the Committee concerning any parishes?—I wish to give the Committee a statement of the paupers in our house who are insane.

State what house you allude to?—The parish workhouse of Saint Leonard, Shoreditch; there are thirty-three Lunatics in that house, so denominated in their ward-book, of whom fourteen are males, and nineteen females; the greater part are only troubled with fits, and, properly speaking, not insane. There are no dangerous Lunatics in the house at this moment; but it is the custom of that house to place refractory people among the Lunatics as a punishment. There are also seventeen Lunatics at this time belonging to the parish, at Warburton's madhouse at Hoxton, and I should submit the propriety, in case of a bill being passed, of all Lunatics being put out.

Under what restraint are those persons confined in your house?—If they are very bad they are handcuffed; and sometimes they have a strait-waistcoat, and are leg-locked.

When did you visit them last?—I have not visited them for a considerable time, and I do not know the state they are in at this moment.

Do you know in what manner they are treated?—They receive no treatment for their insanity.

Neither medical nor moral?—Neither medical nor moral, for it is totally impossible in that house.

How are they fed?—According to the contract of the house; meat so many days in the week, and porridge so many other days, and an allowance such as other persons receive in that house.

There is no difference made whether they are in a high or low state, but food given to them as to other paupers in the house?—I have always known that to be the case; now, the sum of money which it would take to support those people, supposing there are fifty Lunatics on an average, would be a little more than 1,000*l.* a year, at the present price charged at Burroughs's, which is half-a-guinea or eleven shillings a week. I have in my pocket an abstract of the parish expenditure for the maintenance of Lunatics out of the house for two years, from Lady-day 1813 to Lady-day 1815, amounting to 671*l.* 13*s.* 6*d.* paid at the before-mentioned rate of half-a-guinea or eleven shillings a week. If the whole of the Lunatics were placed out, taking the number to be fifty, it would come to about 1,300*l.* a year.

What do they cost in the workhouse?—4*s.* 2*d.* a week, to the best of my recollection now; it has been 4*s.* 8*d.* and 5*s.* it is according to contract.

But the payment is always the same as for the other paupers?—It is.

Are you sure that Mr. Burroughs charges now 10*s.*—I am not certain of it; I believe it is from ten to eleven shillings. It appears that there were, upon an average of two years, twenty-two persons at Burroughs's; I proposed to the parish to make a separate building for them, but the expense they objected to. There was no less a sum than 42,800*l.* collected in two years for the maintenance of the poor in our parish, and the distress is so great it is almost impossible to raise money.

What is the medical assistance the pauper Lunatics get in the poorhouse?—Merely if they are ill in their bodily health; upon no other occasion do they have medical assistance.

In that case the surgeon or apothecary attends?—Yes; both, if occasion requires.

Have your parish both a Surgeon and Apothecary?—Yes.

When

When you spoke of the pauper Lunatics, who were usually permitted to keep company with the Greenwich hospital men, being turned out, when Doctor Robertson came to visit them, did you mention that of your own knowledge, or only as what you had heard from other persons?—I mentioned it of my own knowledge.

How long since is it that this happened?—I cannot recollect exactly; but I am certain it was in the year 1814; it must have been somewhere about the close of the year 1814.

Do you know by whose order this was done?—I cannot say that I know by whose order this was done; but I know that Sir Jonathan Miles and Mr. Watts were present, and I heard an observation from them, which struck me particularly, that they had managed it nicely, or nearly to that purport; for it was clearly a manœuvre to show the yard was kept entirely for the Greenwich men.

The Greenwich men are removed?—I believe they are in part removed to a building on the opposite side; they are now separated.

Do you know of this happening frequently, or only once?—Only once. I wish to add to my evidence of the day before yesterday, that upon examining some papers, I find that in twenty days the medical treatment of Doctor Veitch, of the patients under his care at Hoxton, was as follows; 11 blisters, 5 bleedings, 425 mercurial pills, 8 setons, 670 powders of calomel and digitalis, and 5 cuppings; I administered these medicines myself, and performed these operations by the directions of Doctor Veitch.

Were those directions in writing?—I had never a written direction from Doctor Veitch, but in one single instance.

Lunæ, 25^o die Martii, 1816.

Lord ROBERT SEYMOUR, in The Chair.

Dr. Richard Powell, called in, and Examined.

YOU stated that, as secretary to the Commissioners, last session you visited the licensed houses in London and its neighbourhood with them; state how often they have visited them within the last half year?—On the 28th of November, the 7th of December, the 9th of January, the 17th of January, the 23d of January, and the 21st of March, those are the visitations; we have seen all the licensed houses, except about four. The number of licenses this year is increased, it amounts to nine for the reception of ten Lunatics, and to twenty-seven for the reception of more than ten Lunatics in each house.

Be so good as to state what observations you have to make?—Here is the minute-book.

In what condition were the houses in question found?—Generally better.

In what respect?—In respect to accommodation, which is considerably increased in the large houses. In consequence of the Report of the Committee, and the stress laid upon the subject when I had the honour to be before them last year, and the necessity which is expressed in that Report for devising some plan in order to see individual patients, I thought it my duty to make out alphabetical lists of the names of each patient who ought to be in every house. I have taken these alphabetical lists with me on our visitations, and we have seen every patient according to such list. Upon looking over the list after going round, and then returning to those who might before have been omitted, we have accounted for every patient who was in the house; we thus know those who have been discharged, those who are dead, those that are in the house, and, in truth, more circumstances respecting them, with greater facility of reference, than we could have done before. The Commissioners further wished, that the rooms appropriated to the reception of patients, in each licensed house, should be numbered, so that they might have the power of referring to particular rooms, and know the use that is made of each room, and any changes which are made; this has been adopted in most of the houses.

I believe there are at this moment at Sir Jonathan Miles's, 385 patients?—On our last visitation I entered the number of patients in each room, and I have not the aggregate; but I believe I can tell you the number. On the 27th of October last there were then 89 private patients, 152 officers and seamen, and the parish patients, with the Greenwich and Chelsea, 245, making in the aggregate 486.

Is that the last time you visited it?—No; this is the return which was made on the 27th of October. On the annual day of licensing we have required a return of the name and number of the patients in each house. It was from these lists

I made

Mr.

James Birch Sharp.

Dr.

Richard Powell.

Dr.
Richard Powell.

I made out the alphabetical lists, and have added those which have since been returned.

Then you saw those 486 patients, with the accommodation of beds, &c.: in short you saw the whole?—We did.

How long were you in that inspection?—More than two hours.

Have you made a note in that book of the time?—The time has been entered in consequence of a representation of Mr. Warburton to the Committee, that visitation was made late in the day; when that lateness of the day was before two o'clock; and upon referring to the Minutes I find that the Commissioners were engaged in the examination of these houses from half past one, to a quarter past four.

Those Minutes go to Sir Jonathan Miles's houses standing upon his ground only?—Houses standing upon his ground only; his establishment.

Is it not possible that the same patient may be presented to you twice among the 486?—Among paupers it may. We cannot attempt to catalogue the parish patients, because they are not returned on their admission.

In your examination, during the last Session of Parliament, you have stated that the Commissioners visited Mr. Rhodes's house on the 5th of January 1815; and it appears by the Minutes that the number of patients then was 275, of whom about 215 were paupers, and that in the paupers department, especially that part devoted to women, is unwholesomely crowded. Has any alteration taken place at Mr. Rhodes's house at Bethnal Green?—There has.

Is there an increase of room?—There is an increase of room; there is another yard opened backwards; and certainly there is a considerable increase of room.

I see in the Report of the Commissioners, dated November 28, 1815, that the number of patients in the house was 270, out of whom 220 were paupers?—I believe that is correct.

Did the paupers appear to be improperly crowded?—The men certainly were more so than the women; but there have been great alterations for the accommodation of the paupers in that house; and much greater in the adjoining house, under the charge of Mr. Talbot.

Are those alterations improvements?—Certainly.

In your examination last year, you state that the pauper men were not defended from the external cold; and in your examination of November 28, you say also, it was stated to Mr. Rhodes, that the allowance of blankets was insufficient at that season of the year; do you know if any steps have been taken to provide covering to the paupers since that period?—I do not.

Have you visited the house of Mr. Rhodes since the 28th of November 1815?—We have not; in the general number of houses there are three blankets to a bed, here there were only two.

Did the paupers appear better clothed and more comfortable, than they were at any preceding visit?—Yes, they were.

It is then your decided opinion, that the inquiry of the Committee last year, and the representations that were made to the persons keeping these houses, as well as the general attention of the public being called to this subject, have been the means of improving the condition of this unfortunate class of persons, the pauper patients confined in these houses?—I think it has.

You have told us that Mr. Rhodes's house is improperly crowded during the day; be so good as to speak more to the night; Do the male patients lie together, or singly?—I believe singly.

During your late visitation, have you observed more or less personal restraint applied to the patients?—Generally, I cannot say that I see much alteration.

Are they generally so much in irons?—I think in some places irons are more used, I do not mean to say improperly, and waistcoats are diminished.

I see in your minutes, that the Commissioners have directed a letter of instructions to be sent to each house, expressing a wish that the rooms should be numbered in a regular series in each separate licensed house; Has that instruction been complied with?—In most instances, and where it has not, some reason has been given for it.

Have you found considerable convenience where the plan has been adopted, in the course of your examination of licensed houses?—Yes: and a plan with it would be very useful also.

And you would wish to recommend it for general use?—Certainly.

In your examination of last year, the Commissioners reported that the house of Mr. Burrow at Hoxton, was in very bad condition; that Mr. Burrow himself was from home; that the pauper mens department was too much crowded; that their privy was in a most offensive state; that part of the yard was under water; and that there was an accumulation of cinders and refuse matters in other parts of it; Are

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Dr.

Richard Powell.

Are any of those various complaints, or any of them, remedied?—They are remedied in a great degree.

In what respect?—I see by the Report of the 9th of January 1816, that the House is improved; that a new room is built as a second story for the pauper men; that the yard is clean, and that the accumulations of filth, and pools of standing water, which the Commissioners have heretofore reprobated, are removed.

Did you find when you were examining that house, any thing respecting which you felt it your duty to note in observation upon it?—This is the minute; with respect to that part of the house of Mr. Burrow, the pauper womens house contains eight rooms, two of which are day rooms; there are also patients in two of the bed-rooms, in one of which, dirty blankets are drying before the fire at the same time, and are extremely offensive; in another there was the corpse of a person who had died the preceding day, and ought to have been immediately removed; upon the whole these houses are much improved, and well managed; but they are still deficient in warmth and ventilation.

What steps did you take with Mr. Burrow upon the subject of the dead body which you found there?—The Commissioners reprobated the practice, and were told it was a parish patient; that Mr. Burrow had sent to the parish, and that they had neglected to take it away; I believe this was the reason given.

Did you mention to him the necessity of having a place set apart for the removal of dead bodies?—Certainly.

Did he assent to the propriety of it?—Yes.

Did he agree to it?—I shall be very much disappointed if it is not done when we next visit.

With respect to the beds; do the pauper men lie singly?—Singly.

And the bedsteads are not of width enough to accommodate two?—Some are of width enough to accommodate two; some have a wooden partition between them; and I think this a very good bedstead, and a steady one; Mr. Burrow is introducing iron bedsteads.

Be so good as describe this double bedstead; Does it make two sets of bed-clothes necessary?—It does.

Have you particularly turned your attention to the increase or diminution of insanity in the country; can you furnish the Committee with any recent observation of yours, upon that important subject?—In the year 1809, the Registers having existed five and thirty year for the purpose of ascertaining the comparative prevalence of the disease; I made out a list of the numbers returned in each year, distinguishing those which were returned from houses in London, and those returned from the country; that paper also led me to notice some imperfections in the present Act, especially with respect to the country returns. And I beg leave to state, that the country returns are still very imperfectly made indeed. I have continued this table to the year 1815, and the whole is at the service of the Committee.

Do you think that the evident increased number within the last three years, has arisen from the number of Lunatics being itself augmented, or from greater care being taken to return the real number that existed?—I cannot answer that question. I know that the returns from the country are still very imperfect, though they are always, and always have been, correct in London. In your last printed Report, for instance, there is mention made of the house of a Mr. Gillett, of Taunton, from which we have never had any return; and I know there are a number of houses that do not make returns regularly.

From your own observation, and from what you have learned from others, who attend professionally upon Lunatics, do you think the number of Lunatic patients in London is on the increase, or stationary, or declining?—In the paper I have mentioned to you, I was led, considering the increase of population, to think it must be rather on the decline; but since that period it has started up again considerably, and I know not on what account.

Then since the paper written from 1809, has the malady increased within the bills of mortality?—It has in every year; the number of patients increased gradually to 1813, and then was very large; within the last two years they have decreased gradually.

From how many of the English counties do you get returns?—I have a list here of houses in England, from which returns were made in the last year; and in your last Report there is an account of houses from which returns had been made in the preceding year; since that, Lunatics have been returned from four or five new houses, chiefly in Yorkshire; there have been returns from houses in twenty-one counties in the last year, and several counties have more than one or two houses in them.

There are some counties in which there are none?—Many counties, as I believe.

Dr.
Richard Powell.

From how many counties have returns been made by the Clerk of the Peace?—Of minutes made at visitations, within the last year, from Surrey, Buckinghamshire, York, Warwick, Dorset, Norfolk, and from the county and city of Norwich, there are several corporate towns who have a Clerk of the Peace, and visitors distinct from the county in general; in such cases, there is great difficulty to find out what the houses are in many parts of the kingdom, or from whom to expect returns.

At what hour did the Commissioners visit Mr. Rhodes's house in 1812?—On December the 18th and 24th, at one o'clock in the day; they met at the College of Physicians on each of those days, and immediately, and in the first instance, proceeded to visit the houses under the care of Mr. Rhodes, licensed to Mr. Warburton.

You have no doubt that the Commissioners were there before two o'clock?—None; I am perfectly sure of it.

Do these minutes show at what hour they left these premises?—Not in that year; but in consequence of the statement made, that these houses had been then visited at a later time of day, the Commissioners, this year, have resolved that the time they occupy at each house shall be mentioned upon the minutes.

At what time of the year can the Commissioners grant licenses?—On the third Wednesday in November, or within ten days is the time prescribed by the Act.

Has any practical inconvenience arisen from only one day in the year being fixed for that purpose?—Yes; two applications have been made since that period in the present year, by persons to whom the Commissioners could not grant licenses according to the legal explanation given of the Act; consequently those persons cannot open any house, or if they do, they open it at their peril, but no prosecution can take place under the present Act, without leave of the President of the College of Physicians; and if the conduct of such persons was open and fair, and no attempt made at secrecy or deception by them; I do not know that any prosecution would be allowed to take place; indeed I know at this moment of a return made of admission of a patient into a house in that situation.

Whether, in your opinion, it is a matter of importance that insane persons should be the objects of medical treatment?—Distinctly and unequivocally so; I could give you many instances of its efficacy.

Whether the treatment mentioned by you is not particularly important in the early stages of the disorder?—I think good in almost all, but more particularly in the early stages.

Do you think in the establishment you have mentioned to day, and with which you are acquainted, what you have now mentioned has been sufficiently attended to?—As matter of opinion I should say not.

Has it not been the ordinary custom to treat insane persons rather as objects of mere confinement, than as objects of medical treatment?—I can hardly venture to give such an opinion; I do not think they have sufficient medical attention paid to them, as far as my limited experience goes.

What is the number of patients in the licensed houses within the London district?—Between 1700 and 1800.

Mercurii 27^o die Martii, 1816.

The Right Honourable GEORGE ROSE, in The Chair.

DOCTOR Powell attended, and delivered in the following Paper, which was read.

Dr.
Richard Powell.

THE substance of the following Tables is taken from a Paper on the comparative prevalence of insanity, in the Fourth Volume of the Medical Transactions of the Royal College of Physicians, as far as the year 1809. The Return made in the subsequent years to 1815 are added.

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Number of LUNATICS returned under the Act 14 George III. cap. 49, and entered in the Registers.

YEAR.	London Numbers.	County Numbers.	Aggregate of each Year.	Aggregate of each Lustrum.
1775 - - -	253	153	406	1,783.
1776 - - -	217	120	337	
1777 - - -	245	116	361	
1778 - - -	238	113	351	
1779 - - -	241	87	328	
1780 - - -	258	108	366	1,893.
1781 - - -	252	128	380	
1782 - - -	240	109	349	
1783 - - -	311	91	402	
1784 - - -	296	100	396	
1785 - - -	299	115	414	1,892.
1786 - - -	253	110	363	
1787 - - -	270	91	361	
1788 - - -	257	102	359	
1789 - - -	286	109	395	
1790 - - -	283	148	431	2,292.
1791 - - -	283	123	406	
1792 - - -	354	137	491	
1793 - - -	331	166	497	
1794 - - -	322	145	467	
1795 - - -	344	110	454	2,242.
1796 - - -	305	141	446	
1797 - - -	342	115	457	
1798 - - -	303	130	433	
1799 - - -	328	124	452	
1800 - - -	339	138	477	2,463.
1801 - - -	368	122	490	
1802 - - -	441	149	590	
1803 - - -	363	108	471	
1804 - - -	324	111	435	
1805 - - -	313	110	423	2,271.
1806 - - -	293	150	443	
1807 - - -	276	138	414	
1808 - - -	284	170	454	
1809 - - -	336	201	537	
1810 - - -	367	177	544	3,657.
1811 - - -	435	204	639	
1812 - - -	448	252	700	
1813 - - -	618	275	893	
1814 - - -	571	300	871	
1815 - - -	543	307	850	

Doctor *James Veitch*, again called in, and Examined.

WHAT does the letter you have in your hand go to prove?—To prove my attention and anxiety to promote the recovery and comfort of the patients at Hoxton, of whom I took the charge in a medical capacity.

Dr.
James Veitch.

[The witness delivered in the same, and it was read as follows.]

“ 10 Grafton Street, Fitzroy Square, 3d July 1815.

“ Sir,

“ I beg that you will have the goodness to state to the Board, that in consequence of their appointing me to the charge of the patients confined at Hoxton, I lost no time in visiting that institution. The appointment becomes peculiarly interesting from the nature of the cases that are and may become the object of my care, as I hope I may be useful; and I can assure the Board I am sensible of the honour they have done me by selecting me for such a situation; I shall therefore devote myself to the execution of my duty, and to carry into effect, with alacrity, the humane intentions and views of the Board.

“ On mustering the patients confined in the house of Sir Jonathan Miles, I found

Dr.
James Veitch.

I found that they amounted to one hundred and fifty, including officers, seamen, and marines; one man has been since received, two have been sent to Bethlem, and two were this day discharged, by order from the Board. I imagine that it is now the intention of the Board to discontinue the removal, from this establishment, of recent maniacal cases by Mr. Haslam, in which character of insanity, I can alone be decidedly useful; I have therefore to beg that such determination may be communicated, by the Board, to that Gentleman. When I reflect on the great importance of diet in the treatment of all diseases, and adverting to the quantity of animal food consumed by the patients at Hoxton, I am of opinion that the proportion of such aliment is too great; I have, therefore, to recommend the quantity of beef or mutton to be diminished by six ounces, and in lieu of which, eight ounces of bread-pudding, or rice-pudding, and the occasional use of fruit, particularly at this season of the year, might be substituted with advantage. If the quantity of animal food were still further diminished, it would prove useful, but the change it would be well to bring about gradually; salted meat and cheese should, however, in my opinion, be at once discontinued; the great object of diet in the treatment of maniacs is to avoid the extremes of repletion and hurtful inanition.

"Conceiving the Board may approve my ideas on this subject, I have selected about fifty men with whom I could wish to commence this system, as the extent of their mental powers will enable me, by care, to establish a more improved mode of dining, and taking their other meals; and as maniacs may be rendered susceptible of emulation, and are capable of receiving useful impressions from example, as some of the mental faculties seem but little impaired by insanity, it can be gradually extended to others, where admissible, and likely to be conducive to their comfort and recovery. I therefore propose that the fifty selected should dine in the largest sitting-room; that the tables from which they eat their food should be covered with a table-cloth, and that each should have a wooden trencher, a tin cup without a handle, capable of holding a quart, and a spoon.

"As cleanliness is of the utmost importance in aiding the powers of medicine in this disease, I suggested the propriety of a large bathing-tub, and Sir Jonathan Miles gave directions that one should be constructed agreeably to my orders.

"It is highly desirable that the hurtful practice of chaining men down should be conquered; and that those who are bodily diseased should be attended to; and to accomplish these two important and necessary arrangements, five additional keepers will be required.

"The area in which the patients take their exercise is small, and powerfully acted on by the sun; the thermometer stood at 96 exposed to the solar rays. The summer is generally perceived to add to the already diseased excitement existing amongst maniacs; and, holding this fact in view, it becomes necessary to guard as much as possible against the increased temperature, arising from the direct and reflected rays of light and heat; the colonnade for their taking shelter in during wet weather, is by no means sufficient for their protection from the sun, without their being most disagreeably and hurtfully crowded together; the erection of an awning, to extend from the wall to which they seem habitually to repair, without regard to the intense and scorching rays of the sun, of the same character as that in use on board of ship, would accomplish this object, and contribute greatly to their recovery; one of the sail-makers of Deptford could be sent for to measure the breadth and length required, and it could be made of old canvas in the yard.

"I will now terminate this letter by observing, that if the cases sent with our seamen and marines to the naval hospitals were transmitted with the maniacs to Hoxton, and also the treatment they were subjected to while in hospitals and marine infirmaries, such information could not fail to prove highly useful, by throwing light on the character of the disease with which they are so lamentably afflicted; their ages are even unknown at Hoxton.

"It is my intention to live at Hoxton the instant I can procure a proper residence.

"I am, &c.

"Alexander McLeay, Esq }
"Secretary to the Transport-Office." } " (Signed) James Veitch, M.D."

Mrs. Mary Humieres, called in, and Examined.

Mrs.
Mary Humieres.

WHAT was the motive of your coming to this Committee?—I came to answer any questions, that the Committee might put to me respecting mad-houses.

How long have you been come to England?—I arrived here on Saturday night.

Where

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Mrs.
Mary Humieres.

Where did you come from last?—Montrieul.

Did your brother write to you to attend this Committee?—He did.

How long were you resident in the house of Mr. Talbot, at Bethnal Green?
—Three years within six weeks.

In what capacity?—Housekeeper.

By whose recommendation did you gain that situation?—Mr. Rogers told me of the situation, and I went to Mr. Talbot.

Your brother was then acting as surgeon to the establishment?—He was.

It was through his recommendation to Mr. Talbot you attained the situation?
—Yes.

During the time that you were resident as housekeeper at Mr. Talbot's, did you observe any thing in the management of that house, which, knowing the object of the inquiries of this Committee, you think it necessary to state?—I know that patients were very ill treated, a vast number of them.

How long have you left?—I left Mr. Talbot on the 6th of August, 1813.

State to the Committee what those acts of ill treatment were, to which you have alluded?—Samuel Ramsbottom's ill treating Mr. Driver, a farmer from the country.

Did you see that yourself?—I did.

State what you saw?—It was one morning when I was sitting behind the table at breakfast time, I heard a terrible noise on the gentlemens side up stairs; I went up in consequence, and found Samuel Ramsbottom ill treating Mr. Driver, by beating him with a pair of boots in a most dreadful manner.

Was he in bed?—Yes, he was in bed; he had beat him out of bed, and the young man ran down the gallery with Samuel after him.

Was he in his shirt?—Yes.

What steps did you take?—I went to Mr. Talbot immediately, and told him of it.

What was Mr. Talbot's answer?—He said he knew Samuel was a cruel brute.

Was nothing further done than making that observation?—Nothing more.

You did not hear Mr. Talbot reprimand Samuel Rambard, or Ramsbottom, for that conduct?—No, I did not.

Is there any other case that you can state, as to the harsh treatment by this keeper of the patients under his charge?—His general conduct was extremely brutal.

In what way?—In kicking the patients, and thumping them sadly.

In striking them with his fists, and kicking them?—Yes; Captain Dickinson he used extremely ill, when he was under his care.

In what way?—In striking him, and using him extremely ill.

Was Mr. Talbot acquainted with his conduct to Captain Dickinson?—He was.

How do you know that?—I heard the conversation.

What was that conversation?—Mr. John Dunston, Mr. Talbot, and Mr. Rogers, were together in the poor womens yard; they heard a noise, and looked through the pales, and saw Sam striking Captain Dickinson in a dreadful manner, while confined in a waistcoat; they came up to the house together, and I heard Mr. Dunston say, "Sam is too great a brute to have the management of patients; and, Talbot, you ought to send him away," Mr. Talbot said "I will see about it," or something to that effect.

In what year did that happen?—I believe about ten or eleven months before I left the house; but I cannot exactly say.

How long was Ramsbottom a keeper after that time?—I left him a keeper when I came away.

Will you take upon yourself distinctly to state to the Committee, that to your knowledge Mr. Talbot was acquainted with the cruel conduct of Ramsbottom to the patients under his charge, and yet continued him as a keeper up to the period of your quitting the establishment?—Yes.

Have you any other statement to make as to the conduct of Ramsbottom?—He used to treat Mr. Holmes extremely bad.

In what way did he treat him bad?—By striking him.

Was it the constant practice of Ramsbottom to strike the patients in the house?—It was.

Was there any thing particular in the conduct and behaviour of the three patients whom you have mentioned, that seemed to render coercion and severe treatment more necessary in their case, than in that of other patients?—No; Captain Dickinson was in a very high state of disorder; but after taking to his bed, it was myself that went and attended him, and gave him every thing that he took without the least force.

Mrs.
Mary Humieres.

With respect to Mr. Driver whom you have mentioned, in what state of disease was he?—He was a little high at times, but nothing to require his being confined, or any thing of that kind.

Was he manacled?—Very seldom.

With respect to Mr. Holmes?—He was perfectly harmless.

Were you acquainted with a person of the name of Isabella Adams?—She was a patient in the house.

What species of patient?—She belonged to Saint George's, Hanover Square.

Was she often in a state of great irritation?—Not very frequently.

When she was in that state of irritation, where was she confined?—She was confined in a place in the yard.

Describe the nature of that place?—It was originally a pig-stye; it was run up high on purpose for her, I have seen her confined there for three weeks together.

Was she ironed?—She has been ironed there in the crib, with wrist-locks and leg-locks, and a chain two or three times across her body.

Was there an iron bar placed between her legs, in order to prevent her joining her feet together?—There was; Mr. Talbot had the bar made on purpose for her.

For what purpose was that bar, as she was chained to her crib?—It was not used when she was chained to her crib, but when she was allowed to go about.

For what purpose was it used?—To confine her that she should not get away; to prevent her from escaping.

For how long together have you ever seen her using that bar?—Indeed I cannot say; at different times she has had it.

For a month together?—I do not conceive she wore it so long as that.

A fortnight?—Perhaps a week.

Describe the nature of the bar, and the way it was used?—It was confined to each angle, with a chain coming up between her legs, which was attached to her handcuffs.

Do you know what was the weight of that chain?—I cannot say indeed.

What was the size of it?—It was very large.

As thick as your middle finger?—It might possibly be as thick as that.

Could she walk with it?—Yes.

Was she a very furious patient?—No, a very harmless patient; you might sit and talk to her when she was in the highest state.

Was she ever employed in domestic purposes about the house?—Yes, she was.

In what situation?—Scouring the rooms.

Was she ever employed in the kitchen?—Not while I was there.

Have you heard she was before?—I have, but not while I was there.

Was there a female keeper in that establishment, of the name of Betty Welch?—Yes.

What was her character?—She was a very turbulent woman, very harsh and cruel to the patients.

Did you ever see her ill treat Isabella Adams?—Yes.

Describe what you have seen her do to her.—I have seen her lock her down in her crib with wrist-locks and leg-locks, and horse-whip her; I have seen the blood follow the strokes.

Have you seen her often horse-whip her?—I have sundry times; three or four times.

Did she do it of her own good-will and pleasure, or did she do it by the order of any one else?—By the order of Mr. Talbot.

Did you hear Mr. Talbot give those orders?—He gave them to me, and I begged him to tell Betty Welch himself.

Did you hear him give those orders to Betty Welch?—I did.

What were those orders, to the best of your recollection?—"Betty, I desire you to go and take Isabella Adams, confine her to her crib, and give her a good horse-whipping."

Do you recollect what she had been doing?—She had been trying to make her escape.

Did you ever complain to Mr. Talbot of the ill treatment that Isabella Adams received?—Yes.

What was his answer?—He said that he had leave from the Saint George's gentlemen; that they told him the best thing he could do with her was to give her a good horse-whipping.

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Mrs.

Mary Humieres.

Has she made her escape out of the house more than once?—Several times.

Where is Isabella Adams at present?—I do not know.

Do you know whether she is alive or dead?—No I do not.

Where is Betty Welch?—I left her as a keeper when I came away.

How long was it after you had seen her horse-whip Isabella Adams, and the time you quitted the establishment?—She never was horse-whipped after the trial came out of Mr. Chawner; Mr. Talbot made this observation to me “Mrs. Humieres, we must not follow that practice of flogging Isabella Adams, or else the public will get hold of it; a whip is not to be suffered to be used in our house.”

How long did that conversation take place before you quitted the house?—I cannot exactly say.

What was the nature of the whip that Betty Welch used to horse-whip Isabella Adams with, was it a whip with a thong?—A whip with a whale-bone handle, and a long lash, a sort of dog-whip.

Was the situation in which Isabella Adams was confined extremely cold?—Very cold.

What covering had she?—She had a rug.

Did she appear to suffer from cold?—She was extremely ill for some time after she came out.

Ill of what?—She used to go double, and was very much emaciated.

Was she much straitened for room?—No, she had room.

Had she a good allowance of food?—She had the common allowance for poor people; sometimes she did not take her food for two days together.

Jovis, 28^o die Martii, 1816.

The Honourable HENRY GREY BENNET, in The Chair.

Mr. Edward Wakefield, made the following Statement:

“I HAVE observed in the evidence of Mr. Richard Sharpe, a statement of the use of digitalis to insane persons: For the information of the Committee, I beg to state, that I learnt from Doctor Finch, of Laverstock, that in the case of a poor woman sent to him from Christ Church, by the Right Honourable George Rose, he found her to have been a raving maniac, chained for many years to the walls of the workhouse; that upon her arrival at Laverstock her pulse was at an extraordinary high rate, which he reduced by digitalis; in consequence of which, although remaining insane, she was placid. He increased the dose, and her senses returned; but still her pulse was at an unnatural rate. In order to reduce it he increased the dose of digitalis, and she became melancholy; he then left off the medicine, and she entirely returned to a raving maniac, but by giving her proper doses subsequently, she remains in a perfect state of sanity, and is now acting as a scullion-maid in his kitchen.”

Mr.

Edward Wakefield.

Mrs. Mary Humieres, again called in, and Examined.

HAVE you any other information to give the Committee relative to the conduct of Betty Welch to the patients that were under her care?—She generally used them very cruelly.

Do you recollect any particular instance of that cruelty?—Yes.

State it?—Mrs. Elliot was extremely ill used, by being beat very much, and used in a shocking manner.

Did you see Betty Welch beat Mrs. Elliot?—No, I did not.

What knowledge then have you of the transaction?—I saw that Mrs. Elliot had been very ill treated, and complained to Betty Welch; she said she could not help it.

What signs of ill treatment did Mrs. Elliot show?—She had two very black eyes.

Did Betty Welch acknowledge that she had been the means of giving her those black eyes?—She said she had knocked them against the bedstead in getting up.

Was the ill treatment of Betty Welch confined to that day only, or was it continued?—Mrs. Elliot continued in the house several days.

During that time, was she ill treated?—I have every reason to believe she was.

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Mary Humieres.

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*Mrs.
Mary Humieres.*

Do you happen to know why she was removed?—I have every reason to believe she was removed for the ill usage she received.

What reason have you for that belief?—Her husband fetched her away in a great hurry, and was very angry, and said she was ill treated.

Did he say that to you?—He did.

Do you know any other case respecting the conduct of Betty Welch?—Mrs. Cook was very much abused indeed, she had a dreadful black eye; Mr. Warburton took notice of it himself.

In your presence?—Yes, to me.

What followed that remark of Mr. Warburton's?—Mr. Warburton said, "Mrs. Humieres, how came that patient with such a black eye?" I said, "it was Betty Welch had pushed her down stairs." He said, "You should take care and not suffer the patients to be treated ill by Betty Welch, as I know she is very violent."

How long had Betty Welch been a keeper?—She was a keeper when I went there, and was a keeper when I came away.

Will you take upon yourself to state to the Committee, that Mr. Talbot was fully acquainted with all the various cruelties and ill-treatment which Betty Welch practised upon the patients under her care, such as you have described?—Yes; I made them known to him myself.

Was there a keeper in the house by the name of Bridget?—Yes.

Was she there when you first came to the White House?—Yes.

Did you leave her there?—No.

Was she discharged?—Yes.

For what?—For hanging wet clothes in the poor womens hall, contrary to Mr. Talbot's orders.

Was she a keeper particularly severe?—Particularly so.

Describe any thing you have seen her do, that warrants your charging her with severity?—The first thing I saw her do of that kind was about a week after I came to the house; I went early one morning among the poor women, and caught her flogging them out of bed with a birch-broom, and forcing them under a pump into a tub of water to wash them.

Was that her constant practice?—I believe it was; I have seen her do it several times.

Those were pauper patients?—Yes, they were.

Was this in Winter or Summer?—When the snow was on the ground.

Have you ever seen her strike the women under her care?—Repeatedly.

Was it the practice of the house for the keepers to strike the patients?—It was a practice too commonly used among the poor people: and amongst the patients in general, I may say.

Were the persons of the females, when you first went into the house, much covered with vermin?—I cannot say when I first went that I examined the house much; I was not accustomed to it; when I began to get used to the situation I found that they were very much so.

Do you recollect making any complaint to Mr. or Mrs. Talbot upon that subject?—I do.

What was the answer you received?—They told me to try all I could to eradicate them.

What was the appearance of the bodies of the female patients?—Quite in a state of eruption, from an incessant scratching.

Was any remark made upon that subject?—I do not recollect any particular remark.

Was there any thing said as to its being a humour in the blood?—Yes, there was.

What did you do in consequence of the instructions you received from Mrs. Talbot?—I ironed the beds.

Did you get rid of the quantity of vermin with which the house was infested?—No, I did not entirely.

Is it true, that the quantity of vermin was such that it was an amusement to the patients to kill them as they ran up the wall?—Bugs it was; I have seen them covered with bugs.

Do you recollect the circumstance of a Marylebone patient being confined for a considerable length of time in a strait-waistcoat?—Not for a considerable length of time; he was very cruelly confined.

What do you mean by cruelly confined?—He was confined so tight, that I have every

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every reason to believe the circulation of the blood was stopped, and that the man must have died if he had not been released.

What symptoms of suffering did he show, which warrant you to say he would have died?—It was the servants that came to fetch me; one of the patients came first, and told me there was a poor man in the hall that had been lately confined, and was very ill; I was serving out wine in the parlour, and did not immediately attend to it; soon after one of the keepers came and begged me to come, or the man would die; I went out and desired the keeper to unconfine him; he said he would not; I went and fetched one of the other keepers, and desired him to cut the waistcoat-strings with a knife; which he did; the patient showed me his arms, and they were quite black with the marks the waistcoat had made.

When you saw the patient in that situation did he appear to suffer much with pain?—Very much; he was calling out for me.

Was he otherwise in a state of irritation?—No, not at all; he was rather in a low state, he was very quiet.

Can you state to the Committee the motive for putting him in a strait-waistcoat?—Yes, the keeper told me he had confined him for buying two pennyworth of tobacco without his knowledge; the poor patient said it was his own money, and why should it not be laid out if he pleased.

Were you present at Mr. Talbot's during the time of the typhus fever?—Yes.

Do you recollect any circumstance concerning the distribution of wine to the patients under the effects of that fever?—Yes.

State them?—I recollect Dr. Hooper coming to see the Marylebone patients when they were getting well; I think it was the last visit he paid; he asked me how much wine the Marylebone patients then took; I told him half a pint a day each patient. When I went down, Mr. Talbot asked me what had been said; I told him; he said I ought to have told Dr. Hooper a pint of wine a day to each patient, instead of half a pint; that Marylebone parish must pay for the others.

What quantity of tea and sugar are allowed the pauper patients who pay for it, and how much does each pay per week?—When they come in, if their friends can afford, they pay two shillings a week if they have tea twice a day, and one shilling for once a day, there is no additional tea allowed for that; they have their water put in the kettle after the gentlemen have had their tea; that is Mrs. Talbot's profit.

While you were at the White House, had you any thing to do with the management of the linen room?—No; I had not any thing to do with it, there was a linen room maid kept on purpose.

Do you know any thing of what becomes of the clothes of the patients when they are brought into the house, and can you state to the Committee what proportion of those clothes are in use, and what proportion are put by in the store-room?—I cannot say what quantity is put by; the clothes are first taken up into the linen-room, and properly booked and put by; after that there is a certain quantity given out for the use of a patient, and the rest Mrs. Talbot has, if it is possible; sometimes the friends of a patient know what they have given, and insist on seeing it.

Do you mean by that to state, that the patients wear their linen longer than is intended by their friends, so that when their friends visit them they are informed how much that patient destroys his or her clothes; that he or she must have a fresh supply, which are accordingly provided; and the things thus accumulated are sold by the Mistress to the Master for the purpose of clothing those patients whom he provides with clothes?—They are kept back, and sold to the Master of the house for the purpose of clothing the private patients.

Explain to the Committee what knowledge you have of that transaction?—I have known Mr. Holmes's linen to be kept back, and Captain Harvey's; Mr. Cockerton's likewise, and a number of others whose names I cannot recollect.

What do you mean by being kept back?—The patients had not them to wear.

Of this linen of which you have spoken, can you take upon yourself to say that Mrs. Talbot sold it to Mr. Talbot, or any body else?—To Mr. Talbot.

That you can state positively of your own knowledge?—Yes; Mrs. Talbot has employed Mr. Talbot's niece for days together to pick out the marks of different people's things.

You have seen that with your own eyes?—Yes, I have; and have helped to pick them out myself.

Do you know any thing concerning the clothing of the parish patients?—Yes; when the parish patients clothing is brought in, it is taken up into the linen room and put up.

Can you state to the Committee any particular parish of which the clothing

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belonging to their paupers has been kept back for the emolument of Mrs. Talbot?—From the parish of St. Pancras the flannel petticoats and aprons are chiefly used towards clothing the country patients which Mr. Talbot has to provide with clothes, likewise St. Andrew's; the St. Mary-le-bone white petticoats have been frequently cut up and made into blankets for the use of the house, I have myself cut up fifteen at a time.

By whose order?—Mrs. Talbot's.

Explain the nature of that bill, [*handing a paper to the witness.*] In the first place, is it your hand writing?—Yes, it is; it is the bill of those things which had accumulated from the different patients, which Mrs. Talbot desired me to set down.

Was that bill made out by you of the linen and clothes that were in the store-room that belonged to patients, either private patients or parish patients, and the value put upon them, as per bill, for the purpose of their being sold to Mr. Talbot, and the proceeds given to Mrs. Talbot?—Yes.

Do you, of your own knowledge, know that Mrs. Talbot received, and that Mr. Talbot paid, the price so set down?—He agreed to pay it, but I do not know whether he did pay it.

Did you hear him say he had?—I did.

Do you remember a person by the name of Hodges dying suddenly in the house?—Yes.

What were the circumstances attending her death?—Mary Seale, the keeper, came and called me, and said Mrs. Hodges had died in the act of forcing with water-gruel.

Did she describe to you the manner of her death?—She said that she was forcing her, and that she fell back.

Did you see the body?—I did.

Immediately afterwards?—Yes; she came up to me immediately afterwards; I saw the patient, and desired her to take her to bed, and I ran to fetch a little brandy.

Was she in a very weak state?—Not when she came in; she was in a very low state.

Was she walking about?—Yes.

Was she emaciated and feeble?—She was rather feeble.

Was it your impression then, and is it now, that her death was occasioned by suffocation arising from the act of forcing?—I cannot say; Mary Seale told me she died in the act of forcing.

Was it your impression that she so died?—It was.

Do you recollect any other instance of sudden deaths taking place in the establishment, during your stay there?—Yes.

State them?—I recollect a gentleman who died in his chair in the kitchen while sitting there, he came from Saint Luke's; and a man who hung himself.

In all those cases in the first you have named of Mrs. Hodges, and in the two others, were juries summoned to examine into the circumstances of their deaths?—There was a jury summoned in the case of the man who hung himself, but not in the others.

Do you recollect the account that Mrs. Talbot gave you of the circumstances of the death of the gentleman who died in the act of forcing?—Yes.

State to the Committee what took place?—Mrs. Talbot was complaining to me of Mr. Talbot's great neglect in the house; that he was not fit for the house, and that he did not take any care of the patients. This gentleman was brought in in a very high state of disorder, and refused to take his food: and Sam had taken him up stairs, and was forcing him in a room over the parlour; he called several times for Mr. Talbot to come up for God's sake, or he should be killed; Mrs. Talbot tried to persuade Mr. Talbot to go up, but could not prevail on him, and Sam came down a short time after, saying the patient had died in a fit.

Was the attendance of Mr. Talbot, and his inspection of the house regular, while you were in the establishment?—No.

How often did he in point of fact go round the house, to the best of your recollection?—I have known him for two months together not go round the house at all.

Was he generally at home?—Very seldom.

Has it at any time happened that Mr. and Mrs. Talbot were out of the house for days together?—Yes.

Under whose care then were the patients?—My care; I had the whole management of the house while they were out.

Were you ever in the habit of selling clothes and linen for Mrs. Talbot to a Jew?—Yes.

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What clothes were sold?—A few things which did not answer the purpose of clothing the patients which they had to clothe.

Things out of the store-room?—Yes.

Did they belong to the private or parish patients?—To private patients.

To any amount?—No great amount.

Did Mr. Talbot ever desire you not to show the Commissioners into all the apartments of his house?—Yes, he did.

Did he assign to you any reason why you should conceal any room in the house?—Yes.

What was the reason?—There was a brick room in the poor womens yard, which he did not wish them to see; and told me not to show it to them, unless they found it out themselves.

What was the state of that room, that it was not to be shown to them?—It was a very cold dismal place.

How many beds were there in it, and how many people slept there?—I cannot say exactly how many cribs there were, but eight at least.

Had each patient that inhabited that room a crib to himself?—Yes, a crib to himself.

Were they of that class of patients that are known in the Establishment by the name of dirty patients?—No, there was no difference made, they were mixed; there was no separation; that was the reason I could never obtain my point in getting them clean.

Do you mean to state, that amongst the pauper women patients the dirty and the clean were placed in the same room together?—In the same room all together.

Was this place, so to be concealed from the Commissioners, cold and damp?—Yes, it was both cold and damp.

Did the female patients who were confined there, suffer in consequence of the inclemency of the weather?—I do not think they suffered much from the inclemency of the weather in general, they used to do formerly. I recollect a young woman that lost her feet by the excessive cold; I knew her very well.

Can you take upon yourself to say, that the cold was the cause of that young woman losing her feet?—I understood so; she lost her feet before I came into the house.

Can you say that the female patients did not suffer from colds and from chilblains, the result of being exposed to the cold air?—They have had their feet very blue, and chilblains certainly.

Were pains taken to wrap up the feet of those in blankets, or to cover the bodies of those patients who were either in a state of mania, or in that state of debility which would make them in the first instance disposed to throw off all their garments, and in the other so helpless as not to be able to keep them on?—Yes, they had each of them a rug to cover them, that is to say, a quilt made from the Mary-le-bone petticoats, and covered with stuffs of various kinds.

Are you speaking of their morning dress, or their covering at night?—Their covering at night.

Did they all sleep upon straw, the clean as well as the dirty?—I have known some clean patients sleep upon straw.

While you were at the White House, what was the greatest number of patients you had?—We had about 300 upon an average.

Of those patients, can you state how many slept two in a bed?—I cannot say, indeed, but a vast number of them.

Can you give a guess how many double beds there were?—I believe about a dozen or fourteen on the poor mens side, and all double beds on the female side, except the cribs for bad patients.

Have you ever known that a dirty and a clean patient were put together in the same bed?—No, I cannot say that I have.

Can you say what proportion of males to females there were during the time there were 300 patients in the house?—I cannot say.

You have stated to the Committee that you were three years in the White House; what were the reasons of your quitting it?—I never knew; I was never acquainted with it.

During the time that you were there, did you always hold the same confidential situation for which you considered yourself originally engaged?—Yes, I did, to the hour of my coming away.

Was there any particular treatment that you received from Mr. or Mrs. Talbot that, in your own view, rendered it necessary that you should quit their establishment?—Yes; for about six weeks or two months before I came away I observed

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Mary Humieres.*

observed a strangeness and coolness in Mrs. Talbot's behaviour, and when she came home she said that I could not be any longer in the parlour, agreeable to our agreement; I begged of her to inform me what was the reason, and what I had done, she said she would not tell, but that it was her resolution when she came home. Mr. Talbot told me she was come to stop four days in the house, and that she desired I would take but very little notice of her, and I did not; the first day I breakfasted in the parlour as usual, as she did not come down; when the dinner was ready I went up stairs into my room; shortly after Mr. Talbot sent a patient to call me down to dinner, when I entered the parlour, I said, I did not know I was to come down; he answered, "Mrs. Talbot is gone to Miss Rhodes's, where she is to dine, and I have nothing against you, Mrs. Humieres, neither do I know what Mrs. Talbot has." The day after she dined at home, and as I found the alteration took place, after dinner I told Mrs. Talbot that I could not think of stopping any longer with her; she said, "Oh, very well, do you mean to leave me in this way?" and I said, "Yes; I cannot think of stopping since you have made that alteration in my situation." I begged her to come up stairs to look at the trunk before I packed it up; she said, "I will come with you;" and as I began to take my clothes out, Mrs. Talbot said, "Mrs. Humieres, it is not that I came for; I did not think any thing of that kind; but are you going to leave me in this way?" I said "certainly;" in consequence of that I left the house.

Did Mrs. Talbot express to you then, or at any other time, that she had any suspicion whatever of your integrity, or of the manner in which you had managed those concerns of the house which were intrusted to your charge?—No.

Did you go to Mr. Warburton and speak to him respecting the change that had taken place in your situation?—Yes, I did; I went the next morning and saw Mr. Warburton; he said, "Well, Mrs. Humieres, good morning, what is the matter?" I said, "Sir, I am come to inform you, that I have left the White House," he said, "dear me, on what account? I hope it is not on account of what old Dunston said;" I said, "I do not know, Sir;" he said, "Well, Mrs. Humieres, we were always very well pleased with your conduct in the White House; I was very well satisfied with you, and the patients all liked you very well; and I shall go over by and by, and inquire of Mrs. Talbot what is the reason of this change, and you come to me to-morrow morning for an answer, and I shall try to reinstate you." I went the next morning; Mr. Warburton said, "Well, I have inquired of Mrs. Talbot, and she did not give me any reason why you left, neither can I take upon myself to replace you, having put them as Master and Mistress of the house; but the first situation that offers I will not forget you. I have no situation at present in Whitmore House that I should wish you to undertake; but I will take care that old Sam shall be turned out—"

Who is old Sam?—Samuel Ramsbottom; he used to be called Sam.

Did you make over your accounts to Mr. and Mrs. Talbot before you came away?—Yes; I had no account except the tea-money.

Not a complaint was made upon that subject?—No; I told Mrs. Talbot before I went away, that if she had any questions to ask me, I was very willing to answer any she might put to me.

Did you, in that conversation with Mr. Warburton, relate the statements that you have given before this Committee, as to the cruelty of the above-named keeper Samuel Ramsbottom?—No.

Then how came Mr. Warburton to allude to him?—Mr. Warburton knew he was a great brute, and had often told Mr. Talbot to turn him away.

In your hearing?—No; I heard Mr. Talbot say, that Mr. Warburton had been talking to him about Sam, and desired that he would send him away; he said he should let them know he was master of the house—Sam should not go away. My brother received a note from Mr. Warburton a few days after, it might be a fortnight, desiring me to come up to Covent Garden Coffee-house, and inquire for a Mr. M——; there was a situation which he thought would suit me; I did, and agreed with a person of respectability to go and have the care of her sister which I did.

How long did you stay with that person?—I staid near a twelvemonth.

Why did you quit that situation?—The sister of the lady whom I had under my charge married, and that made an alteration in the family.

Have you ever received from that family any testimonials of your good conduct during the time that you lived in it?—I have a note in my pocket which I received.

[The Witness delivered in a recommendation of the family in which she had lived, in which it was stated she was recommended by Mr. Warburton.]

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Martis, 2^o die Aprilis, 1816.

The Honourable HENRY GREY BENNET, in The Chair.

*Andrew Baird, M. D. called in, and Examined.**Dr.
Andrew Baird.*

WHAT situation do you hold?—Inspector of Naval Hospitals.

Did you ever belong to the Board of sick and wounded?—Yes.

Did you consider it as part of your duty to visit the establishment of Lunatic seamen, at Sir Jonathan Miles's, at Hoxton?—I once visited that institution. I felt that the whole Board considered it as much a duty as any other attached to them.

What year was it in which you visited that Institution?—I was appointed a Commissioner for the Sick and Wounded Board, and charged with the duty of Inspector of Hospitals in March 1803. I left that Board in June 1804, and my visit was made during that period.

Are the Committee to understand that you made that visit considering it to be a part of your duty, and not from mere motives of humanity?—Certainly as a part of my duty.

Was there any distinct order existing on the Minutes of the Board, directing periodical visits to be made by members of it to that establishment?—I do not know that there was; my duties, as Inspector of Hospitals, carried me frequently out of town, in visiting those institutions which my appointment required of me; so that in that time it did not occur to me to inform myself whether there were minutes to that effect or not.

Did you yourself make any charges for coach-hire; or do you know that such charges have been made by others?—The charge of coach-hire for the visit performed by me does, I believe, stand upon the books of the office; and I understood that the expense of every visit so performed was charged by the other Commissioners.

Do you recollect whether there is any order upon the Minutes of the Sick and Wounded Board, given by the Admiralty, directing such periodical visits to be made?—I recollect, that during the naval administration of my Lord St. Vincent, communication was held (whether in written correspondence, or verbally, I do not know) upon the subject of the Institution at Miles's; and the impression on my mind is (but to that I cannot speak positively) that instructions were then given by the Admiralty for that institution to be particularly looked at.

Do you conceive that that establishment at Miles's was directly under the authority of the Sick and Wounded Board?—Most certainly. There was a contract formed, in which their ration was altered, and there was some difference in the price of the ration; but at this period I am not prepared to say what it was. When I said that the Commissioners of the Sick and Wounded Board had a control over the establishment of Sir Jonathan Miles, of course I only meant that part connected with the Lunatic Seamen.

*Mr. John Watts, again called in, and Examined.*YOU have stated in your examination before the Committee, some days back, that it has been the practice of your establishment to give to Mr. Haslam 100*l.* per annum, in the nature of a fee, for the recommendation of patients?—Yes.*Mr.
John Watts.*

How long has that practice taken place?—I cannot say exactly.

You know it to have been the practice for more than one year?—Yes.

Can you form any conjecture how long it has been the practice that he has received any gratuity?—Seven years.

On the same condition?—Yes.

That must appear in the creditor's account?—Yes; I am not prepared to give the exact date; I could give the exact date at home.

The payment of that money then stands upon the books of your establishment?—Yes.

Was this gratuity given for the recommendation of patients out of the hospital of Bethlem only, or generally for the recommendation of patients from all parts of the kingdom?—Yes; from all parts.

Were the certificates of insanity, which those patients brought with them, either from Bethlem, or from other parts of the kingdom, signed or counter-signed by Mr. Haslam?—The certificates that Mr. Haslam generally used to sign were for those patients that came from Bethlem. Other patients that came in were generally signed by other physicians or surgeons.

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John Watts.

And not counter-signed by him?—I have seen his name with another medical gentleman; but not often.

Then you mean to state that every patient that was sent from Bethlem to your house by Mr. Haslam, was sent there under and with a certificate signed by him?—Not all; but the greater part of them were.

Have you reason to believe that Mr. Haslam recommended patients to other establishments, or considered himself as bound by your retaining fee of 100 *l.* per annum, to select your house in preference to others?—I think, our house in preference to others.

Are you in the practice of giving to other physicians, or other persons having under their care insane persons, a similar fee?—No.

Do you make any present to any of the Commissioners who inspect your house?—No.

Then the Committee are to understand you to say, that no present or gratuity whatever is paid, by your house, to any physician, commissioner, or otherwise, for the purpose of either recommending patients, or for the trouble of inspecting your establishment?—I mean to say, that we give no perquisite or fee to any physician, surgeon, or apothecary, excepting Mr. Haslam.

Can you give the Committee any tolerable correct estimate of the number of persons that have been sent from Bethlem to Hoxton for the last three years?—I cannot say precisely; but I should think about five and twenty patients per annum: I do not wish to be considered as stating it correctly.

Has the number of patients, so recommended, increased, as the salary allowed to Mr. Haslam has increased?—I hardly think it has.

What was the motive for that increase of salary then?—That I cannot state. Sir Jonathan gave me directions to pay him 100 *l.* instead of 60 *l.*

Mr. John Blackburne, again called in, and Examined.

Mr.
John Blackburne.

ARE you one of the keepers of Bethlem hospital?—Yes.

How long have you filled that situation?—Since April 1811.

Did you know a patient by the name of Brooks?—Yes.

How long has he been confined in the hospital?—To my own knowledge, only since 1811; but I have been informed by the servants of the hospital ever since 1800.

Is he in the hospital at present?—Yes.

Are there any particular circumstances attending his case, which you know of your own knowledge?—When I came into the hospital in 1811, I found him leg-locked and hand-cuffed: he continued in that state until 1813; then I took his hand-cuffs and his leg-lock off.

Are the Committee to understand by the use of the term leg-locked, that he was chained to the bedstead on which he slept, by the leg?—Yes.

So that for two whole years he was unable to move beyond the limits that the chain allowed by which he was fastened to the bed?—Yes.

Was he during the whole of that period, or any considerable part of it, in a state of violent derangement?—I always considered him a bad patient.

What do you mean by the word bad patient?—Very much disordered.

Was he mischievously inclined?—Apparently so then.

Do you think that if he was in the same state of mind at the present moment as he was from 1811 to 1813, he would now be chained to his bed?—To answer the question fairly; at the time I let him loose, he appeared as violent as he was from 1811 to 1813; but upon trial of having his liberty he behaved very well, wore his clothes, and walked in the gallery with the other patients, perfectly safe.

Should you, according to the present practice of Bethlem hospital, chain a person to his bed who was in the state of mind in which Brooks was when you released him in 1813?—He certainly would not long be kept so confined.

By whose orders was he liberated from irons?—Upon my own responsibility.

Did Mr. Haslam resist his liberation?—He did not know it at first.

How long after he was liberated was Mr. Haslam acquainted with his being loose in the gallery?—I had occasionally got him up to see how he behaved; finding he behaved well, I reported it to Mr. Haslam; his answer was, as near as I can recollect—"Very well, very well."

Did he make any remark to you when he found this man, who had been chained for two years to his bed, walking about the gallery, in the same state of

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mind as when he was so chained?—Only that he supposed the chain had worn the violence of his disorder out.

But, according to your opinion, he was, when you released him, exactly in the same state of mind as when he was placed in irons, and during the two years he was confined?—Yes.

Was he naked during the whole of that period?—No; his handcuffs were occasionally taken off to put a clean shirt on once a week, and then put on again.

Was that shirt the only garment that he wore?—He mostly used to lie in bed then.

Was he a clean patient, or a dirty one?—At that time a very dirty one.

Did he lay on straw?—Yes, with blankets; he is very much improved now, and is as clean as any patient in the gallery.

How soon did that improvement of personal cleanliness take place after his release from irons?—He progressively improved for three months, and has continued clean up to the present period.

Have you any doubt that the change for the better that has taken place in his habits, no less than in his mental disease, has proceeded from the change in his treatment?—Most certainly it has.

You have no doubt of that?—Not the slightest.

How are clothes procured for them?—They are served by the Hospital, and charged to the friends.

Were those clothes with which you dressed him his own, or those that were provided by the Hospital?—They were provided by the Hospital.

Consequently not his own?—His friends paid for them; I believe two black gowns and two shirts were what he used to have for a year.

Did you know a patient of the name of Ellis Cross?—I recollect a patient of that name.

During the time that he was in the Hospital while you knew him, was he ever in a state of bodily sickness?—About the last three weeks previous to his death he was.

What was the medical attendance he received?—I reported him to Mr. Haslam; in the course of the three weeks he might probably see him four or five times, not more than six.

Do you recollect what was the bodily disease under which he then laboured, and of which he afterwards died?—It appeared to me a decline from the violence of his disorder.

Was he a patient always in a state of mania?—Yes.

Violent?—Yes.

Was he sufficiently sensible to make any complaint, or feel any want of that medical care which an attendance five or six times in three weeks seems to demonstrate?—He did not complain; he was not sensible of any neglect.

Was he put upon any sick diet?—I believe not; I am pretty certain not.

So that during the last three weeks of his life, when he was dying of a decline, he received the same diet of meat and bread and potatoes, that other patients did who might be considered, bodily, as well?—To the best of my recollection, exactly the same.

Did you know James Tilley Matthews?—Yes.

Were you attendant upon him?—Not particularly so.

Of your own knowledge, during the many years you knew him, did he ever exhibit any symptoms of violent insanity?—I knew him from 1811 in the Hospital to 1813; he always appeared to me one of the most orderly men I ever saw; a well behaved gentlemanly man.

Did you ever know him under any circumstances of personal restraint?—No.

Did you ever know him in a state of irritation that could warrant it?—No.

Was he much respected by the patients and servants of the Hospital?—No man more so.

You were the keeper, I believe, who had the care of Norris some years before he died?—Yes.

How many years did you wait upon him as keeper?—From April 1813, to February 1815, when he died.

You knew him in the Hospital from 1811 to the time he died?—Yes.

When first you knew him, was he in a state in which he could have been allowed, under proper securities, to walk about the gallery?—No doubt of it, with a strait-

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strait-waistcoat and a pair of handcuffs; and if he had been inclined to kick, there were means of fastening his legs with a little extra attention on the part of the keeper.

Have you any doubt, that if Norris was now in the Hospital in the same state as what he was in 1811, that he would be daily walking about in the gallery, always supposing proper attention and restraint, and that he would not have been chained down in the way he was for so many years?—There is no doubt, under the restraint I have mentioned, he might have had that liberty with safety to himself, and without danger to others.

Did you know a keeper of the name of Davis?—No, he died before I came to the Hospital.

From what you have learnt, was Norris irritated by a keeper of that name?—There is no doubt of it.

Davis's character was not that of being a sober man?—Quite the contrary.

Was not the principal insane feeling that operated upon Norris's mind, the fear of being poisoned?—He always appeared to feel great terror of being poisoned, particularly before I had the care of him; it was in a great measure owing to the pouring his victuals and his beer into bowls, placed at his door at the time his door was shut.

By a change in that practice, you attained so far his confidence, that he ceased to consider you as a person who had an inclination to poison him?—Certainly; he was satisfied he had his provisions the same as other patients, in consequence of its being served out in his presence.

Was it the practice, prior to your attendance on him as keeper, to pour out his broth outside his door, so that he did not see it done?—I believe it was generally in Davis's time.

He used to complain of that practice, and appeared satisfied with the change that had taken place while under you?—Quite satisfied that he had no more poison in his than the rest had in theirs; he used often to observe, he supposed it was necessary to put some in for the cure of the disorder.

Were not the paroxysms of insanity, under which Norris occasionally laboured, produced principally by irritation?—A great deal from irritation, and the mistaken idea of a greater quantity of poison being put into his provisions than others.

Have you ever heard Dr. Monro remonstrate with Mr. Haslam against the extreme coercion used in the Hospital?—A great number of times.

What was the nature of the objections urged by Dr. Monro, and the answers given to them by Mr. Haslam?—Dr. Monro has often observed, "Upon my word, Mr. Haslam, I cannot agree with this mode of confinement, (meaning Norris's,) it appears to me cruel; surely, some other means might be applied that would be equally effective; for, depend upon it, the Public will not feel satisfied if ever this case is noticed; neither do I feel satisfied." Mr. Haslam's answer uniformly was, "if Norris was to have his liberty to walk in the gallery, I should not consider my life safe to come down there."

Did Dr. Monro remonstrate against the system of coercion that was pushed so far against other patients besides Norris?—I never heard him interfere with any others.

Did you ever hear him remark upon the number of persons that were chained to their beds, or chained in flannel gowns in the sitting-rooms?—I do not recollect ever hearing him make any particular observation upon them; he always appeared to leave the mode of confinement to Mr. Haslam; when in conversation, he appeared to submit his opinions with deference to Mr. Haslam's.

As far as you have the means of forming an opinion, have the patients received, or do they now receive, for their corporeal or mental diseases, that medical attention and relief which they may require?—They have very little physic given them.

No occupations?—None.

No amusements?—No other than walking in the green yard, whenever it is fine.

Are cards allowed?—We have a pack occasionally; we have had one pack since we have been in the new house.

Have those cards been lately taken away?—They are there at present; they were given by Mr. Haslam.

Is the attendance of Dr. Monro very regular?—For some considerable time it has been.

What time?—He has been more regular within the last two years, I mean in walking about the gallery.

When

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When first you came to the Hospital in 1812, what was the nature of his attendance then?—Always on Committee days, and generally once more.

Mr.
John Blackburne.

How often does the Committee meet?—At the old house every Saturday.

Do you mean to say that Dr. Monro walked down the gallery and saw every patient in the house twice a week?—No; he never went, to the best of my recollection, unless a case was reported to him.

So that his visits to the Hospital were confined to the Committee-room; and that he never thought it part of his duty to walk the Hospital, unless there was a case to which his attention was particularly called?—That is what I mean.

Can you state how long, at any one period, Dr. Monro was without going round the Hospital, and personally inspecting the patients in it?—I should think something more than a month; I cannot exactly say.

What was the attendance that Mr. Haslam used to give?—At the old house, previous to 1814, he used to go round the gallery sometimes twice, and sometimes three times, a week; not more than four.

In case any of the patients required medicine, who made up the medicines that were to be given to them?—Mr. Haslam. When we had a particular case that wanted medical assistance, I used to request the porter to let me know when Mr. Haslam came. Unfortunately, he (the porter) had a paralytic stroke in 1811, and very often used to forget; when that was the case, I was obliged to wait till the next day, and attend in the servants hall on purpose to see Mr. Haslam myself.

Then it might happen from the paralytic attack that the porter laboured under, which deprived him to a considerable degree of the use of his faculties, that a patient might require medical attendance on the Monday, and not receive it till the Tuesday?—Yes.

How long was the porter in that situation in his office, after he was seized with that paralytic attack?—He was seized in 1811; he held his situation till 1815; in the course of that time he might be off duty eight months, being not in a state fit to do his duty; I mean bodily ill.

Did, in point of fact, the forgetfulness of the porter, arising from his incapacity as to memory, often prevent the patients, who wanted medical relief, from receiving it?—Very often; and Mr. Haslam's inattention in not walking the galleries.

Are the patients periodically physicked and bled?—They used to be at the old house.

The system is changed in the new?—The time is not come in the new yet.

Then up to last year all the patients were physicked and bled at a particular period of the year?—Yes.

Vomited likewise, and bathed?—Yes.

Mercurii, 10^o die Aprilis, 1816.

Lord ROBERT SEYMOUR, in The Chair.

Sir John Newport, Baronet; a Member of the Committee, made the following Statement.

Sir
John Newport,
Bart.

I wish to state to the Committee, that the condition in which the insane poor in Ireland now are is such as I conceive loudly calls for the attention of the Legislature. The only general provisions for regulation of that class of persons are two Acts of Parliament, one passed, as well as I recollect, about the year 1782 or 1783, by the Irish Parliament, the other in 1806, by the Imperial Parliament. The first of those gives a power to grand juries to make provision for the erection of houses for, and accommodation in them of, insane persons, without restriction as to the extent of money which may be required for their erection or support; but it is entirely optional in the grand juries whether they will grant any and what sum of money for that purpose: The second Act of Parliament gives powers to present a limited sum, to a very small amount, for the like purpose, where they are connected with houses of industry or workhouses. Many of the grand juries have conceived that the operation of the Act of 1806 has been to abrogate the powers given by the former act, whilst others, and particularly the county of Cork, have very humanely conceived that they were still entitled to exercise the powers under the former Act, and have in consequence presented, very largely, for the accommodation of persons afflicted with this malady. The Cork asylum is conducted in an admirable manner, under the care of a very intelligent physician, Doctor Halloran, and now contains 204 persons. I wish to state to the Committee my objection

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objection to the provision of the law as it now stands, as entirely insufficient to the accomplishment of its object: The grand juries of counties being fluctuating bodies, and not guided by any permanent rule in their conduct, exercise, or are enabled to exercise, their power of presenting or withholding presentments capriciously, and accordingly as the feeling of the moment may dictate to them; and the danger will at once be seen of leaving establishments of this nature to depend on the caprice, or more or less humane disposition of the persons who constitute such bodies, actuated, perhaps, by a pressure of claims of another description, calling on their funds in such a way as they may be more disposed to apply them, than to objects of this nature. I would take the liberty therefore of suggesting, that in whatever way the Legislature may be disposed to view this great object, they may make permanent provision for its accomplishment; it is impossible otherwise to expect that establishments of this nature can be properly administered, when the support that they are to derive is entirely precarious. With a view of effecting this object, under the direction of a Committee of the House of Commons which sat in the year 1805, I procured leave to introduce a bill for the establishment of provincial asylums for Lunatics and idiots in Ireland; this bill was not allowed to proceed; but on its second reading, by a very small majority, (I believe by a majority of four) was thrown out. I beg to deliver in this paper, as containing the sentiments of the governors of the House of Industry at Waterford, with which an asylum is connected, upon the necessity of obviating the inconveniences now experienced from uniting asylums of this nature with houses of industry, as is practised in such counties in Ireland as have any provision for Lunatics, with the exception of the county of Cork.

[It was delivered in and read as follows.]

“IT is earnestly and anxiously submitted to all Irishmen who interest themselves in affording relief to their Countrymen suffering under the severest human afflictions, that the attention of the Legislature should be solicited to secure to such poor persons as are unhappily deranged in mind, an adequate provision for their support, and the application of every practicable means for the restoration of their mental faculties.

“In England, by the Act of 48th Geo. III. cap. 96, amended by a subsequent Act in 1811, provision has been made for the erection, in Counties or Districts of Counties, of Asylums for Lunatics and Insane Persons, being Paupers or Criminals, and for their conveyance to such Asylums at the public charge; and in the preamble to that Act, the danger and inconvenience of uniting such Asylums with Gaols, Houses of Correction, or Houses of Industry, is forcibly recognized. The manner in which that Provision was organized in England depending on their Parochial System for the Poor, rendered its extension to Ireland, in that form, impracticable; but the principle of the measure was considered by all who took part in the discussion as at least equally necessary for this part of the United Kingdom.

“The very slender provision which establishments of this nature receive from the Public, where any such exist in Ireland—the precarious tenure of that scanty provision, depending almost entirely on the manner in which this subject may affect the minds of Grand Juries, fluctuating in their composition, and consequently uncertain in their opinions—the connection of those Asylums either with Prisons or Houses of Industry, precluding the application of due means to prosecute, as far as may be, the attainment of cure or relief for these unhappy objects, from the incongruous nature of the institutions with which they are connected—the diversion of much of the funds properly belonging to the infirm poor who are not insane, to supply the deficiency in means allotted for the support of the Lunatics; and the consideration that, under the present system, any County can at pleasure throw upon its more humane neighbours the burthen of supporting those whom it is more peculiarly its own duty to relieve, or suffer them to wander at large unprotected and unprovided for, until the commission of some enormous crime shall place at the bar of justice an unhappy being divested of all responsibility for his actions:—

“All these causes have induced the Governors of the House of Industry of Waterford to entreat the friends of suffering humanity through Ireland to unite with them in pressing on the consideration of Parliament, in the ensuing session, this work of benevolence and charity; the urgency of which, in the case of England, the Legislature has so recently and decidedly recognized.”

“By direction of a Board of Governors of the House of Industry of the county and city of Waterford, specially convened for consideration of this subject, 14th October 1813.

(Signed)

“John Newport, Chairman.”

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Sir John Newport, Bart. proceeded in his Statement as follows :

THE allusion made in that paper to the manner in which many of the counties of Ireland throw off from themselves the expense of the maintenance of Lunatics belonging to them on their more humane neighbours, will be best illustrated by a reference to a list of persons contained in the House of Industry of Waterford, about three years since, which specifies the counties to which they severally belonged ; from which it appears there were 17 out of 48 that did not belong to either the county or city of Waterford.

Sir
John Newport,
Bart.

[The List was delivered in and read.]

Sir John Newport, Bart. proceeded in his Statement as follows :

THE mode by which I would recommend provision to be made, would be by provincial Asylums for each of the four Provinces, unconnected with any house of industry, or other establishment, which connection I conceive highly injurious to the interests of both.

REPORT

THE Report of the Committee appointed in the last Session of Parliament, to consider of the state of the Lunatics, contained such full information on the subject referred to them, as to leave very little to be supplied by Your Committee: It is felt that it is their duty, however, to take such further evidence as might afford a proper basis for being used in the measure recommended to them. They accordingly examined several other Persons, whose Evidence is already before the House, which confirms the opinion stated by the Committee, in the Report of the last Session, as to the Inadequacy of the provisions of the Act of the 1st year of the present Majesty, and as to the indispensable necessity for a new Act to supply the defects of that Act.

Your Committee, therefore, referring to the Report above alluded to, and to the Evidence taken in this Session, feel it to be their duty to report the substance given to the Chairman of the Committee in the last Session, to make the House for leave to bring in a Bill to amend an Act made in the 1st year of His present Majesty, and another Act made in the 5th year of His present Majesty, for regulating Lunatics in Scotland, and for making other Provisions and Regulations in that behalf.

27th July 1818.

R E P O R T

From the Committee on MADHOUSES.

THE COMMITTEE appointed to consider of Provisions being made, for the better Regulation of MADHOUSES, in *England*;—HAVE, pursuant to the Order of The House, examined the Matter to them referred; and agreed to the following REPORT:

THE Report of the Committee appointed in the last Session of Parliament, to consider of the state of Madhouses, contained such full Information on the subject referred to them, as to leave very little to be inquired into by Your Committee; they felt it to be their duty, however, to take such further Evidence as might afford a prospect of its being useful in the inquiry committed to them; they accordingly examined several other Persons, whose Evidence is already before the House, which confirms the opinion stated by the Committee, in the Report of the last Session, as to the Insufficiency of the provisions of the Act of the 14th year of His present Majesty, and to the indispensable necessity for a new Law to supply the defects of that Act.

Your Committee, therefore, referring to the Report above alluded to, and to the Evidence taken in this Session, feel it to be their duty to renew the direction given to the Chairman of the Committee in the last Session, to move the House for leave to bring in a Bill to repeal an Act made in the 14th year of His present Majesty, and another Act made in the 55th year of His present Majesty, for regulating Madhouses in Scotland, and for making other Provisions and Regulations in lieu thereof.

28 May 1816.

R E P O R T

From the Committee on Manufactures.

The COMMITTEE appointed to consider of Provisions
being made for the better Regulation of Manufactures,
in England:—Have, pursuant to an Order of the House,
examined the Matter in them referred; and agreed to the
following REPORT.

THE Report of the Committee appointed in the last Session of
Parliament to consider of the state of Manufactures, contained such
full Information on the subject, as to leave very little
to be inquired into by Your Committee; they felt it to be their duty,
however, to take such further Evidence as might afford a prospect of
its being useful in the inquiry committed to them; they accordingly
examined several other Persons, whose Evidence is already before the
House, which confirms the opinion stated by the Committee, in the
Report of the last Session, as to the Inadequacy of the provisions of
the Act of the 14th year of the present Majesty, and to the indispensable
necessity for a new Law to supply the defects of that Act.

Your Committee therefore, referring to the Report above alluded to,
and to the Evidence taken in this Session, feel it to be their duty to
report the direction given to the Chairman of the Committee in the last
Session, to move the House for leave to bring in a Bill to amend an
Act made in the 14th year of the present Majesty, and another Act
made in the 5th year of the present Majesty, for regulating Manufactures
in Scotland, and for making other Provisions in relation to the same.

25 May 1815

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THIRD
REPORT
FROM THE
COMMITTEE
ON
MADHOUSES IN ENGLAND,
&c.
WITH AN APPENDIX.

Ordered, by The House of Commons, to be Printed,
11 June 1816.

THE REPORT	- - - - -	p. 3.
Two PLANS of the GLASGOW Lunatic Asylum; with Extracts from "Remarks on Lunatic Asylums, by Mr. Stark, Architect of that at "Glasgow," intended to elucidate the <i>Engravings</i>	- - - - -	pp. 5 & 6.
MINUTES OF EVIDENCE	- - - - -	p. 7.
APPENDIX	- - - - -	p. 10.

Ordered, by The House of Commons, to be Printed,
17 June 1816.

THIRD REPORT.

THE COMMITTEE appointed to consider of Provision being made for the better Regulations of MADHOUSES in *England*, and to report the same, with their Observations thereupon, to The House; and who were empowered to report the MINUTES of the EVIDENCE taken before them, from time to time;—HAVE, pursuant to the Order of The House, considered the Matters to them referred, and agreed upon the following REPORT:—

BEFORE they close their labours, Your Committee are anxious to lay before the House, the Information they have procured from *Scotland*, relative to the state of public and private Madhouses in that part of the United Kingdom. With the view of obtaining this information, they addressed certain Queries to the Sheriffs Depute of five of the most populous Counties in Scotland; these, together with the Answers returned to them, will be found in the Appendix, which also contains the Evidence of the Honourable *Henry Grey Bennet*, relative to the Glasgow Lunatic Asylum, and St. Patrick's Hospital in *Dublin*.

11 June 1816.

QUERIES sent by Direction of the Committee, to the Sheriffs Depute of the Counties of Edinburgh, Lanark, Forfar, Renfrew and Aberdeen.

1.—WHAT is the number of the Institutions within the bounds of your Jurisdiction, for the reception of Insane Persons, including Private Madhouses, but distinguishing them from such as may have been created by Act of Parliament, by Charter, or by Subscription; and further distinguishing each of these kind of Houses of reception, from the others?—State also, whether any Madhouses within your bounds, have been built specifically for the purpose they are now put to; transmit a List of all these, and of the numbers and stations in life of the Patients confined in each.

2.—HAVE you visited these Institutions, under the provisions of the Act brought in last year?

3.—WHAT

3.—WHAT is the state and condition of these Houses, both the public and the private ones?

N. B.—In your Answer to this Question, state, as fully as your means of information will enable you to do, every thing relating to the management of these Houses and the treatment of the Patients; whether the medical attendance be sufficient; and whether it is or is not the custom regularly to treat the disease of Insanity as one which may be cured by medicine, and by scientific medical treatment, as contrasted with management; whether any practices have come to your knowledge, which you deemed improper, or indicative either of negligence or inhumanity; or whether the conduct of the Keepers of these Houses, and their servants, has generally been marked by humanity and an attention to the comfort, health, and cleanliness of the Patients; whether you think these buildings are, in general, of sufficient extent for the number of persons confined therein; whether they are well aired; whether the apartments are kept properly warm and comfortable; and whether the accommodation is, generally speaking, such as has called for your approbation, or the reverse.

4.—WHAT is the condition of Pauper Lunatics; and what provision is made within your jurisdiction, for their reception, maintenance, and treatment?

5.—HAVE you made any, and what rules and regulations for the management of the Lunatics within your bounds, agreeably to the power vested in you by the Lord Advocate's Act of the last Session?

6.—WHAT was the power of the Magistrates in Scotland relative to the confinement of Insane persons, and the inspection of Madhouses, previous to the passing of the aforesaid Act?

7.—WHAT is the power of the Court of Justiciary with respect to the commitment of Lunatic Convicts in any of the Madhouses of a public nature?

8.—WHAT suggestions have you to make, relative to the improvement of the different kinds of Madhouses in Scotland; and what alterations in, or additions to existing Enactments, appear to you to be necessary or beneficial?



Glasgow Lunatic Asylum.

EXTRACTS from "Remarks on Lunatic Asylums, by Mr. Stark, Architect of that at GLASGOW;"—intended to elucidate the Engravings.

General VIEW of the PLAN of Classification, and of the Distribution of the Classes, in the GLASGOW LUNATIC ASYLUM.

Male Patients.	{	Of the	{	Frantic - - - -	Ground story—remote ward	} of the	Front Wing,	Right Hand.
		Higher Rank.		Incurable - - - -	Ditto, nearest the centre -			
				Convalescent - - -	Principal story - - - -			
				In an ordinary state	Second story - - - -			
	{	Of the	{	Frantic - - - -	Ground story—remote ward	} of the	Back Wing,	
		Lower Rank.		Incurable - - - -	Ditto, nearest the centre -			
				Convalescent - - -	Principal story - - - -			
				In an ordinary state	Second story - - - -			
Female Patients.	{	Of the	{	Frantic - - - -	Ground story—remote ward	} of the	Front Wing,	Left Hand.
		Higher Rank.		Incurable - - - -	Ditto, nearest the centre -			
				Convalescent - - -	Principal story - - - -			
				In an ordinary state	Second story - - - -			
	{	Of the	{	Frantic - - - -	Ground story—remote ward	} of the	Back Wing,	
		Lower Rank.		Incurable - - - -	Ditto, nearest the centre -			
				Convalescent - - -	Principal story - - - -			
				In an ordinary state	Second story - - - -			

"IT may be sufficient, at present, to mention, that the Ground, which will surround the Building, is of such size as to admit of its being formed into a number of distinct enclosures, which, by means of separate passages, or stair-cases, will connect with the wards of the several classes of patients. By these means, the patients of each will have, at all times, the most direct and immediate access to that enclosure which is assigned them for air and recreation; while it may be put completely out of their power to go beyond their own boundary, or to meet with, or even see, any individuals belonging to the other classes.

"In this way, each class may be formed into a society inaccessible to all the others; while, by a peculiar distribution of the day-rooms, galleries, and grounds, the patients, during the whole day, will be constantly in view of their keepers; and the superintendent, on his part, will have his eye both on the patients and keepers.

"An advantage peculiarly resulting from this arrangement will be, that those patients who are quiet and submissive, are relieved of the irksome and disagreeable sensations occasioned by their having a keeper always present, and observing their motions. Those, again, who are inclined to disorder, will be aware, that an unseen eye is constantly following them, and watching their conduct.

"The Building and surrounding Grounds, are separated into two equal parts; one of which is for Males, and the other for Females. Each of these is divided into two subordinate parts; one for a higher, the other for a lower, class of patients. These last are subdivided, each into four parts, for different cases, or degrees of insanity;

1st, Frantic Patients.

2d, Incurables.

3d, Ordinary Patients.

4th, Convalescent."

"THE annexed PLAN, with the above Table of Reference, is intended to convey, at one view, a general idea of the distribution of the Building and Grounds, as connected with the system of Classification already pointed out.

"The ground appropriated for the Asylum is of an irregular figure; but, after cutting off some parts which are required for household uses, a circular area remains of nearly three acres, in the centre of which the Asylum will be placed. The centre of the building is a large octagon, covered with a circular attic. Four oblong wings, of three stories in height, are attached to the octagon, and extend obliquely outwards, in opposite directions, like radii or spokes; and from the outward termination of each wing, two walls are continued outwards, in the same direction with the side walls, and extend to the extremity of the ground. The circular space is thus divided into four large enclosures like quadrants, and four oblong courts. Each quadrant, again, is subdivided into two equal parts, by a wall extending from the centre building to the outward boundary, like a radius of the circle. In this

6. THIRD REPORT FROM COMMITTEE ON MADHOUSES.

manner, eight enclosures, of considerable size, are obtained, all of them full in view of the windows of the superintendent and keepers, whose apartments are in the octagon. These enclosures will be occupied by eight classes of patients of different ranks and sexes, who are in an ordinary state of insanity, or who are convalescent. The four other areas of courts, which are out of view, will be appropriated to the use of those individuals whose disease does not admit of their being mixed with the ordinary patients, or of their going out, except when particularly attended by a servant.

“ In the arrangement of the Building, equally as of the Ground, care has been taken that these apartments, which are the usual resort of the patients during the day, shall be placed in the view of the keepers. Each story of every wing forms a ward, consisting of a row of chambers along one side, and of an oblong gallery on the other, which extends from the centre building to the extremity of the wing. In each story of the Asylum, therefore, there are four wards, two male and two female. The galleries of these wards converge towards a common centre, and near that centre, a room, interposed between the two male galleries, namely, a keeper's room, is placed in view of both, and also of their appropriate areas or enclosures. A female keeper's room, is similarly situated in regard to the female galleries; and, from a circular corridor, still nearer the centre, the superintendent has a view of all the galleries, and also of the day-rooms of these galleries, which are contiguous to the rooms of the keepers.

“ Besides the above-mentioned wards, there are four others farther removed, and of only one story in height, for furious and highly disorderly patients of the higher and lower ranks, and of both sexes.

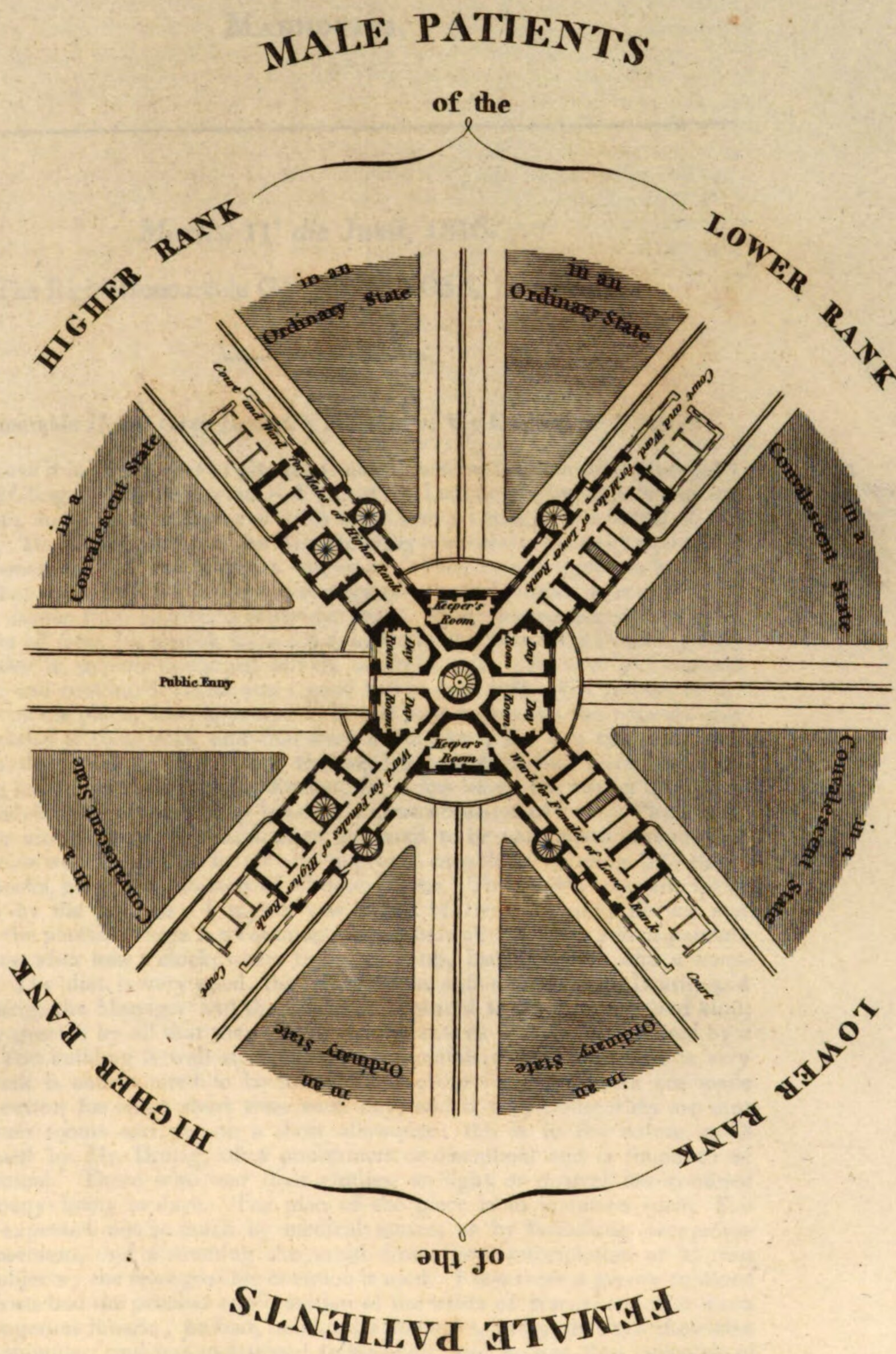
“ The patients, it will be seen from the Table, are arranged in different wings according to rank and to sex, and in different stories of these wings, according to disease.

“ The wards for those, who in the Table are termed incurable, are not meant to be appropriated exclusively to the reception of that class of patients, nor can it be supposed that all incurables, without distinction, should be placed in one ward. These wards are intended only for the worst description of that class; and in general, for all patients whose habits and propensities are offensive to the others. Individuals who are inclined to mischief and disorder, will be controlled by the fear of exclusion, or of temporary exile from their own proper class, and of being transferred to one, in which they will have many deprivations of comfort to undergo.

“ The galleries of the several classes have their windows opening towards their own enclosures; by these means they are secured from the bad effects arising from the view of strangers. They have no view from their bed-rooms, the windows of which are placed high above head. The walls which surround the Asylum will be of sufficient height, not only to prevent the patients being seen by persons from without, but to exclude all idea of the possibility of escape. At the same time, to prevent the damp and cold arising from high walls, the ground towards the boundary will have a quick declivity, from the bottom of which the wall will measure the required height, although not above seven or eight feet above the general level of the enclosure.

“ In the construction of the Asylum, particular provision will be made for diffusing heat through it; that which can be obtained from common fires, in such a building, being too partial and limited. The patients in some hospitals suffer much distress from cold; and its disastrous, and sometimes fatal, effects on individuals are well known. Few perhaps suffer from it so severely, but many complain and appear uncomfortable even in comparatively mild weather.

“ The Building is so designed as to admit of its being executed either on a very limited, or on a great scale, as circumstances may permit. It could be restricted to the reception of sixty patients; although I should imagine, that accommodations for less than one hundred would be scarcely adequate to the almost immediate wants of the City, and of the surrounding country. Executed in either way, its exterior will form a regular design, and its interior distribution will be complete; it would even admit of being extended, at a future period, much beyond the present design, without any disorganization of the plan of management, or of arrangement.”



LOWER HALF

HIGHER HALF

LOWER HALF

HIGHER HALF

STATE PATENTS

STATE PATENTS

MINUTES OF EVIDENCE

Taken before the SELECT COMMITTEE on the State of
MADHOUSES.

Martis, 11^o die Junii, 1816.

The Right Honourable GEORGE ROSE, in the Chair.

The Honourable *Henry Grey Bennet*, a Member of the Committee, Examined.

YOU have it in your power to give the Committee some information with respect to the Glasgow Lunatic Asylum.—I visited the Lunatic Asylum at Glasgow last September; and I hold in my hand some notes which I took at the period of my visitation. The arrangements of the New Building appeared to me to be excellent; it was opened for the first time in December 1804; it is designed to hold 120 patients, but when I visited it there were only 56; several persons were there who had been insane from twenty to thirty-six years. Paupers were maintained there at the rate of from 8 s. a week to 10 s. 6 d. and other persons from 13 s. to 3 l. 3 s. The galleries in general contained but six or eight cells, they were well warmed with flues, and ventilated; there was a good bed in each cell. With respect to the discipline of the place, there appeared to be but little coercion: two patients only were manacled to their beds, and four were handlocked; the two that were manacled to their beds, and the four that were handlocked, had merely been so, according to the statement of the Keeper, for a few hours, the two in their beds having had, it being a remarkably hot day, a great accession of fever. There were very large airing-grounds; classification appeared to be particularly attended to. Amusements were furnished to all who appeared capable of entering into them, such as books, gardening, animals of all descriptions. The garden was principally managed by the patients; I myself saw many of them digging, hoeing and watering the plants. There is a common room, where all the better sort of patients have access after four o'clock, where there are cards, back-gammon and a harpsichord. The diet is very good, the place clean and sweet. Mr. Drurig and Mrs. Drurig, the Manager and the Matron, appeared to be attentive and kind, and were greeted by all that they met of the patients as if it was a visit paid by a friend. The building is well situated, and commands a fine view, and is very gay. Work is endeavoured to be found for all; those who can work are made to pick cotton for some short time each day, and if they refuse, they are shut up in their rooms and put on a short allowance; this is in the nature, as it was termed by Mr. Drurig, of a punishment or discipline, and is found to be very effectual. Those who tear their clothes, or fight or quarrel, are confined for so many hours or days. The plan of the place is to maintain itself. The cure is expected not so much by medical means, as by furnishing occupation and amusement, and distracting the mind from the contemplation of its own insane subjects; the least possible coercion is used. I saw there a person confined whose wrists had the peculiar conformation of the wrists of Norris, and who was a most dangerous lunatic; he had, besides the manacles, straps between the elbow and the shoulder, and was so fastened to his chair, and he was thus incapable of doing any mischief; there was a belt round his body confining his arms, and he was walking about. I have no hesitation in saying this is the best Lunatic Asylum I have ever seen; and I think its principal merit consists in the great classification of the patients, and in the separating them into small families, there being a great number of galleries, and only seven or eight cells in each gallery, with a common room belonging to each, with a window at the end commanding a lawn, with a very gay and cheerful prospect. I never saw an assemblage of lunatics, some of

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whom were dangerous ones, in which there was less of that air of unoccupation and of sadness, which is the ordinary characteristic of persons in that unhappy situation. I feel it, however, necessary to add, that for general adoption, I should think the external decoration of the building much too costly, as undoubtedly the architect who built it had in view no less the convenience of the unhappy maniacs confined in it, than the ornament of the great capital of the Western part of Scotland.

Have you not also visited a Lunatic Asylum in Dublin?—I visited, in August last, Saint Patrick's, or Swift's Hospital, in Dublin; it contains nearly two hundred persons, fifty-one of whom are boarders, and pay for their treatment; fifteen pay one hundred guineas per annum; thirty-four sixty guineas, and two, maintained as such, pay nothing; the whole clean and in good order: the galleries long, having cross windows; cells in the side, and a long window at the end commanding a cheerful view; one gallery in the basement-story for women, appeared to me to be too close to a wall, and from the window there was hardly any view, and the whole was dark. The cells were ten feet eight inches long, eight feet broad and twelve high; the bedsteads wooden; the bedding found by the boarders as well as their cloaths, that is to say, both furnished by their respective families, and of course varying, some better than others. All the others were paupers, and were maintained at the expense of the charity, and to those were found mattress, sheets, &c. which were clean and good. There were but six straw patients in the whole establishment, two of whom were quite naked, having torn their clothes to pieces. In each gallery were two fire-places with iron gratings, but from the Hospital being too crowded, there were in three or four cells two beds in each; I was, however, assured that the practice was uncommon. The airing gardens were small, and no occupation given to the persons who walked therein; the better sort of patients walked in the court and entrance, but there seemed to be a free admission for every one to all parts of the house. An attempt had been made, though but an imperfect one, at a classification; and Mr. Campbell, the steward and master, an intelligent man, appeared quite conscious that that mode of cure was wanted. He expressed himself most anxious to obtain the report of the last year's Committee; he had already seen it, and he told me that he had found more in that report, as to the correct and wise management of patients, than he had ever heard before in the course of his life. It appeared to me, that there was but little medical, and not much mental treatment; it seems to be more a place of confinement than of cure; there are a physician and a surgeon to the establishment; the first receives four guineas a year from each boarder, and the surgeon two; besides, each boarder pays a fine of two guineas for the certificate. There is no limitation as to the time for which the patient is kept; he is maintained there as long as his illness requires it; one of the patients had been there fifty years. The whole was clean and good; the patients were remarkably quiet and orderly; there was little or no noise; there were only three persons in manacles, and no one in a strait-waistcoat; all the windows were glazed, and all of them within the power of the patients to break them, and I was told that that circumstance hardly ever took place. The diet was in general good and plentiful, meat three times a week: I should rather say I thought the diet was too generally full, looking at the practice of other well managed establishments. The galleries were lighted at night, and the cells were not closed till eight in the winter, and nine in the summer; the superior class, if tolerably well, meet in the steward's apartment and play at whist. He told me he had generally two tables. The women's ward, as is usual, was peculiarly clean, many of their chambers were well fitted up and cheerful. Lord Charlemont, who accompanied Mr. Lambton and myself, met there a person whom he had known for years, and who he thought was dead. She used often to dine at his father's table, and was a distinguished person for her talents: I never saw any thing more affecting than the scene, on the renewal of this acquaintance between the parties. I never witnessed lunatics so quiet and orderly; there was a young child of not above six years of age, belonging to one of the nurses, running all over the house amongst all the patients from cell to cell; the matron no less than the steward and master told me, that from constant attendance and watchfulness of the keepers they entertained no apprehension of any accident happening to this child; that during the whole of the day there was, as he expressed it, an eye constantly watching every patient in the house. There were six regular attendants in the house, besides a servant to each boarder, who is considered as belonging to the establishment; many of the lunatics were in the kitchen doing the duties of that part of the establishment, and assisting in the house. If the airing-grounds were larger, if occupation was more generally given, and a classification was carried into effect after the manner of the establishment at Glasgow, I should say, that no establishment could be well better. I think, however, there seemed to be a greater number of women in the men's galleries than I ever saw elsewhere; but the steward denied that any inconvenience arose from it, and said that no man ever entered into the female wards.—I visited also a charity, which I think is called the Richmond Charity, also a Lunatic Asylum; and the impression that I have upon my mind, having mislaid the notes that I took upon the occasion,

occasion, is, that the classification of that establishment is more minute than in that of St. Patrick's; and that the whole is as well managed as any establishment I ever saw, with the exception of that of Glasgow, which is in my mind indisputably the best it has ever been my fortune to visit.

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Perhaps the Committee may like to hear some particulars of the great establishment for Lunatics that exists at *Paris*, named the Salpêtrière. I visited it with Mr. Esquirol the physician, and Mr. Moreau, one of the principal physicians at *Paris*, in December 1815; there were 842 insane persons within the walls, to attend on whom were 87 persons. All that is inside the walls is excellent; the rooms clean, as well as the beds; a constant supply of linen furnished as often as it is wanted, if twenty times a day, change of linen: But the cells out of doors in the square, in which the furious patients are confined, are bad, and cold, and damp, two or three beds in each; some with mattresses, others with nothing but straw. Taking it altogether, considering the numbers, the institution is good, I should say excellent for those that were in a state of cure; but that there are very great faults in it, and the worst patients are cruelly neglected. There are very large gardens and airing grounds, in which the patients that are in a state of convalescence are permitted to walk. All those patients, of whom hopes are entertained of their cure, seem to be extremely well treated; and I have no doubt, from a return that I have seen, that considerable numbers of those patients are discharged as cured: But the incurable patients, particularly those who are in a state of violent derangement, are in a much worse condition than in any establishment I have ever seen in this country. The annual number of persons that are admitted there, are about 280; out of the 842, the number on the day that I visited it, there were 93 in bed. The general and prevailing medical treatment seemed to be, the great use of the bath.

Did it occur to you to ask what the proportion of cured was?—I did ask, and I was promised a list by a physician who went round; it was promised me the preceding year, in 1814, and again in 1815; but I have not received it.

APPENDIX,

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Appendix

- (A.)—Answers by the Sheriff Depute of *Edinburgh*, to the Questions of the Committee of the House of Commons, relative to Madhouses; signed W^m Rae, London, April 26, 1816 - - - - - p. 11
- (B.)—Answers by the Sheriff Depute of the County of *Forfar*, to the different Queries transmitted to him by order of the Parliamentary Committee on Madhouses; signed Adam Duff, Sheriff Depute of Forfarshire; Forfar, 27 April 1816: With Two Enclosures - - - - - p. 19
- (C.)—Answers by Robert Hamilton, Esq. Sheriff Depute of *Lanarkshire*, to the Queries of the Committee of the Honourable House of Commons on Madhouses; dated Edinburgh, 15 May 1816: With two Enclosures - - - - - p. 25
- (D.)—Answers by the Sheriff Depute of *Aberdeenshire*, to the Queries transmitted by Order of the Committee of the Honourable House of Commons on Madhouses, 29 March 1816; dated Aberdeen, 6 May 1816; signed Alex. Moir, Sheriff Dep. of Aberdeenshire: With four Enclosures - - - - - p. 35
- (E.)—Report of the Sheriff of the County of *Renfrew*, respecting Madhouses and Insane Persons - - - - - p. 41

Appendix (A.)

ANSWERS by Sir WILLIAM RAE, Baronet, Sheriff Depute of the County of Edinburgh, to the QUERIES of the Committee of the House of Commons on Madhouses.

THE most satisfactory Answers to the three first Queries, in my power to give, will be found in a Report which, in terms of the Scotch madhouse Act, I lately submitted to the court of Justiciary, and which, in so far as regards my proceedings under said Act, and the state in which I found the Madhouses in this county, I shall now beg leave to quote.

“ On the eighth, ninth and twelfth September 1815, the Reporter inspected the Madhouses in this county, in the order in which they are hereafter set down, being attended by Dr. Duncan senior, and Dr. Spens. On the twentieth of December following, the weather being then extremely severe, a storm of wind and snow prevailing, the Reporter inspected Madhouses N° 1 and N° 3, in order to ascertain the care taken of the patients at that rigorous season, when no inspection could be looked for. On the thirteenth of January eighteen hundred and sixteen, Dr. Spens, under the authority of the Reporter, inspected all the houses situated in the vicinity of Musselburgh; and on the twenty-third and twenty-fifth March, the Reporter, attended by Dr. Spens, again visited the whole houses contained in the following list.

“ N° 1.—Private Madhouse kept by Mrs. *Veitch*, at Newbigging, Musselburgh.—27 Patients.

“ Remarks:—There are several general remarks applicable nearly to the whole private Madhouses, which the Reporter has visited. These shall be noticed in the sequel, after mentioning such remarks as suggested themselves as applicable to each house respectively.

“ On occasion of the first inspection of this house, some address seemed to be used in delaying the Reporter commencing his examination, as also in the order in which the rooms were shewn; obviously with the view of putting such of the patients or their apartments in order, as might have been most subject to animadversion. The defects were, however, in many respects sufficiently apparent.

“ The apartments were, in general, too crowded. In one small room on the ground floor, which was besides far from clean, four females slept. In other three rooms, there were three females, who slept in each; where two would have been enough for the size. In several cases two lay in one bed, which medical persons much disapprove of.

“ N° 25 of the above list, a terrible example of the disease, and who must be disgusting and distressing to the others, from his filthiness and noise, is kept in a sort of outhouse, where he is locked in. This place had been newly cleaned out; but it was apparent that it had been in a most offensive state, in point of filth. This asylum seemed quite unsuited for a patient of this description.

“ There are here no public or day-rooms, but the patients sit in their bed-rooms, and remain there when not in the garden, which is of considerable size; but the smaller part is allotted to the females, though far more numerous than the men; there were nine or ten patients in it. Upon the whole, this house appeared to be crowded, and the rooms not sufficiently ventilated. A more complete separation of the sexes would be desirable, as well as some classification and proper association; but the house and premises do not admit of such changes, especially with the present number of inhabitants.

“ Some doubts having presented themselves, as to the propriety of continuing the confinement of N° 7, and one or two others, an order was given to a medical gentleman in Musselburgh, to visit and make a particular report as to the state of these individuals. The same order was given in every other case, in the course of the inspection, where the least doubt could exist on the subject.

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" At the inspection on the twentieth of December, the same people were found in this house, as at the first visit. N° 25, was in his cell, being in an outhouse on a level with the ground, having a large window without a pane of glass in it; but an outer shutter was nearly closed, so as to exclude in part the snow that was then drifting, and with it a considerable portion of light. The keeper of this house said, that this patient did not feel the cold, and he did not seem to have suffered much from it. She also mentioned, that his habits were rather less dirty; that he became noisy on seeing strangers; that he was very strong, and continued a very untractable maniac. He indeed appears to be one quite unsuited for an establishment of this nature.

" In the apartment above the cell, there were two ladies in bed—no fire in the room, and several panes in the window were broken; and they complained much of cold; and stated that as the reason of their continuing in bed. The keeper promised that this should be immediately rectified. The other patients were pretty much in the same situation. One old lady refused to associate with the rest; she had her window facing the east, open to the top, and would not suffer it to be shut even in the midst of the then tempestuous weather. This shewed a great symptom of insanity; and though she did not seem to have suffered from the cold, yet both she and N° 25 would, in Dr. Spens's opinion, have been infinitely better if means had been used for bringing their apartments to a proper temperature.

" On the inspection of the twenty-fifth March, the Reporter found that N° 4 had been discharged, and that N° 27 had been admitted. The patients were, in general, pretty much in the same state as on the former visits. The Reporter was, however, satisfied that N° 6, 11, and 26, were not in a state of derangement. Therefore in terms of the Act of Parliament he gave directions for their liberation.

" At the last inspection, N° 26 complained of having been severely treated by the keeper, in consequence of some statements she had made to the Reporter at his former visit. The fact seemed acknowledged; and the alarm exhibited by the keeper lest the patients should communicate with the Reporter not in her hearing, together with her general demeanour, satisfied the Reporter that she is by no means of a temper suited for such a charge."

" N° 2.—Madhouse kept by *Thomas Hughes*, Inveresk.—7 Patients.

" Remarks:—This house was only opened last Whitsunday, and is well and pleasantly situated; a good garden, and every thing in very good order, and suited to the board here paid, which is from fifty pounds to two hundred pounds per annum.

" At the visit in March, N° 2 had been discharged convalesced, and N° 5 and 6 had been admitted. In the interval from the previous inspection, great improvements had been made on the premises, in various respects; and nothing could surpass the good order, cleanliness and comfort that was observable in this asylum."

" N° 3.—Madhouse kept by *Mrs. Bourhill*, Cottage Lane, Musselburgh.—11 Patients.

" Remarks:—Of the above number four were in chains, two males and two females. Of these, N° 3 was one, who seemed perfectly quiet and good-natured, but was chained, because he had attempted to escape over a very insufficient fence adjoining the house.

" The apartments were, in general, ill aired and dirty. The patients all complained of being too much confined, and also of being badly treated. The garden is overlooked, and by no means securely fenced. Mrs. Bourhill has six children of her own in the house, and there is only one male keeper. There was obviously too much restraint and confinement employed here, arising from deficiency of keepers, and insufficiency of fences.

" N° 3 of the preceding list having convalesced, and having been in consequence discharged, he called on the Reporter, and mentioned circumstances which led him to believe that the patients in that house were treated with extreme severity; and in particular that N° 8 had not been unchained for a great length of time. It was this information that led to the Reporter's second inspection. And on reaching the house, he went straight to the room occupied by N° 8. On opening the door, the room appeared nearly dark, there being an outer shutter closed upon the window, which, though shattered and thereby insufficient to exclude the wind and the snow, in a great measure excluded the light. On causing this shutter to be opened, it appeared that five panes of glass were wanting, and that

that a quantity of snow had drifted into the room. In a bed without curtains, placed betwixt the window and the door, and being within a foot of the former, lay the unfortunate patient chained by the leg, coiled up under two plies of thin blankets. She had under her a single mattress containing so little wool, that the lower part was quite empty; her feet were cold and edematose, and there were chilblains on two of her toes. She could give very little information about herself, but in general complained of ill treatment, and must have suffered much from cold during the then rigorous season. It was indeed hardly possible to conceive a human being in a more wretched condition. The keeper said, that she was troublesome and unmanageable when at liberty; but of this the Reporter saw no signs, and there certainly could be no reason for applying the degree of severity, with which she appeared to be treated. The Reporter strongly expressed his feelings on the subject, and having sent out a sheriff officer on the following day, to see what state the patient was then in, he found that the effects of his admonition had been to free the patient from the foresaid state of restraint; and that she was sitting comfortably by a fire, but with her hands shackled, which might possibly be necessary.

"Symptoms of undue severity were also apparent in the case of N° 4, a criminal lunatic. The rest of the patients were much in the same state, as on occasion of the former inspection.

"At the subsequent visit by Dr. Spens in January, and by the Reporter in March, the effects of the preceding visit was sufficiently observable. The use of chains was entirely laid aside. N° 8 was enjoying the comforts, on the one occasion, of sitting at the fire, and on the other, of taking exercise in the garden; and the strait-waistcoat was the only species of coercion that appeared to be in use in this house. N° 11, a parish pauper, was ordered to be dismissed as not insane. She had been confined for several years, apparently without cause; and complained of severe treatment."

"N° 4.—Madhouse kept by Mrs. Fuller, Cottage-lane, Musselburgh.—
2 Patients.

"Remarks:—N° 1. in bed, in a miserable, dirty, ill-aired room. The accommodation of N° 2 seemed not much better. No alteration at the subsequent visit."

"N° 5.—Madhouse kept by Thomas Cathy, Musselburgh.—3 Patients.

"Remarks:—N° 1 was confined in a room, gloomy, ill-aired and dirty. N° 2, a young woman fatuitous and pale, probably much confined to a very small room, not provided with any means of ventilation. When the door of this apartment was opened, she instantly and in haste escaped from it like a dog from a kennel. She appeared quiet afterwards and quite manageable. The garden in this case is detached from the house. N° 3 was not shewn to the Reporter; and as a licence had not at that time been taken out, it was not known that there were more than two patients in the house.

"At the inspection in March, the situation of these patients seemed somewhat improved. N° 3 was evidently deranged."

"N° 6.—Madhouse kept by Mrs. Catherine Ramsay, Fisher-row.—
2 Patients.

"Remarks:—Rooms badly ventilated; situation on the street inconvenient; garden detached."

"N° 7.—Madhouse kept by David Moffat, Fisher-row.—6 Patients.

"Remarks:—Rooms ill ventilated and gloomy. Some doubts of the confinement of N° 3 being continued, further enquiry was ordered. N° 2 alledged that she was confined by her daughters, upon account of her money. By the subsequent inspections it was ascertained that N° 2 was deranged. No improvement was observable in the management of this house."

"N° 8.—Madhouse kept by Mrs. Munro, Fisher-row.—5 Patients.

"All these patients were in a miserable state of accommodation, in all respects. N° 5 was confined in bed, in a small room about six feet square, perfectly dark, because, as it was said, she breaks the windows. She complained much of her treatment, and of want of food sometimes, and at others of its being forced down her throat.

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" Her situation was deplorable in all respects. At the subsequent visit by Dr. Spens, this lady had been removed.

" N° 4 was in his room, very cold, having no fire, and the window being broken; his bedding also very bad. N° 3 was in bed, where he was said for the most part to be, in a very small place, dark and without air, except from the door which enters from the kitchen. His keepers promised to have him removed to another room. But on the (subsequent) inspection in March, it appeared that no attention had been paid to this."

" N° 9.—Madhouse kept by Mrs. *Hunter*.—1 Patient.

" Remarks:—Confined in a room of sufficient size, but rather remote and gloomy."

" N° 10.—Madhouse kept by Mrs. *Ritchie*, Fisher-row.—1 Patient.

" Remarks:—This person's situation seemed as comfortable as her case admits of."

" N° 11.—Madhouse kept by Messrs. *Wood* and *Bryce*, Saughton-hall.—
24 Patients.

" Remarks:—The apartments in this house are spacious, clean, and well-aired. The airing-grounds are good; due attention is paid to the classification of patients, according to the state of the disorder; and every thing seems attended to, consistent with the construction of the buildings, not erected for the purpose, that can contribute to the comfort of the patients, or tend towards their recovery. It also possesses the peculiar advantage of being under the care of gentlemen of the medical profession.

" At the inspection in March, N° 10 had been removed to Mr. Hughes, and N° 13 and 20 had been discharged convalesced. N° 22, 23, and 24, had been admitted."

" N° 12.—Madhouse kept by *Thomas Henderson*, Stonedyke-Head.—
14 Patients.

" Remarks:—N° 9 walks out when she pleases. N° 13 seems well, and chuses to remain here rather than go home. N° 4, a dirty patient; his cell very bad. At the inspection in March, N° 13 had been dismissed.

" There seems no separation of males and females; and the house in general is far from clean, or suited for the purpose to which it is applied."

" N° 13.—Madhouse kept by *Thomas Robertson*, Upper Libberton.—
1 Patient.

" Remarks:—Room good, patient in low spirits, might be the better of more society."

" N° 14.—Madhouse kept by Mrs. *Smith*, Upper Libberton.—4
Patients.

" Remarks:—There is no walled garden belonging to this house, the patients are consequently subject to much confinement. N° 1 has, for a great number of years, never been let out of a miserable, dirty, ill-aired, cold, damp, and altogether very bad apartment, with only one small window to the north, much broken, and holes stuffed with dirty straw, and covered with paper. The keeper is an old woman, very deaf, and seemingly ill fitted for such a charge. At the inspection in March, N° 1 was found in the same miserable state. The others were tolerably comfortable."

" N° 15.—Madhouse kept by *Alexander Innes*, Libberton.—1 Patient.

" Remarks:—House clean and pleasant."

" N° 16.—Madhouse kept by *David Trench*, Stonehouse.—4 Patients.

" Remarks:—The apartments of this house are clean, and the state upon the whole creditable to the keeper. At the visit in March, the Reporter had occasion to alter his opinion, as to the conduct of the keeper of this house. N° 1, a pauper, he found lying *in bed*, in a wretched apartment, with a broken window and very bad bedding; and it turned out that she had been constantly in this situation for the space of *three months* past, solely in consequence of having no clothes to put on. It appeared that the only article of clothing of which she was possessed, was one shift then upon her."

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" N° 17.—Madhouse kept by *David Comb*, Cameron Bridge.—2 Patients.

" Remarks :—Rooms ill-aired, and dirty to a degree. Patients in a similar state as to filth. On the inspection in March, these patients were found in a still more horrible situation, in point of filth, than at the former visit."

" N° 18.—Madhouse kept by *James Irvine*, Grange Loan.—4 Patients.

" Remarks :—Nothing worthy of notice, except that the garden is good, and the situation retired, and one patient confined in a sort of hovel out of doors.

" At the subsequent visit, the situation of these patients was found very comfortable on the whole. Previous to last visit, N° 1 had been dismissed well, and N° 4 admitted."

" N° 19.—Madhouse kept by *Thomas Wilson*, Portobello.—one Patient.

" Remarks :—The above patient was confined in a small dirty room, with an offensive dunghill close by the window. In the same state the second visit."

" N° 20.—Madhouse kept by *William Marshall*, Craigintinny.—6 Patients.

" Remarks :—There is a good garden attached to this house, but the house itself is old, and the apartments dirty and slovenly to a degree. N° 5 was found low, and averse to speak. The window of the room ill secured, with two large panes out, said to have been broken by herself; has no relations, and pays a small board. On enquiring of her, if she had dined, it being then past four o'clock, she said, she had not; on asking the cause, the attendant said, it was not yet the general dinner-hour. On afterwards enquiring, however, at the other patients, it was found that the hour of dinner was long past; and the only answer that could be got as to why this unfortunate girl had been neglected, was the general one, that ' they were sure nobody was starved in that house.'

" At the inspection in March, it was found that N° 1 was dead, and N° 6 had been admitted; the premises were in the same filthy state. The inspection was made about the same hour; and on enquiring as to dinner, though the regular hour was said to be three o'clock, yet none of the patients had then dined, though it was past four, nor even any preparations making for that purpose. This shews the irregularity and want of attention to the comforts of these unhappy creatures."

" N° 21.—Madhouse kept by *Mrs. Ann Hay*, Musselburgh.—1 Patient.

" Remarks :—Well taken care of."

" N° 22.—Madhouse kept by *William Yellowlees*, Musselburgh.—
1 Patient.

" Also well taken care of."

" N° 23.—Madhouse kept by *Robert Dickson*, Musselburgh.—1 Patient.

" Remarks :—This lady was found in a very uncomfortable apartment, and the light entirely excluded from it."

" N° 24.—Madhouse kept by *Mrs. Susannah Binnie*, Causewayside, or Newington.—1 Patient.

" Remarks :—This lady was found in bed, where it was said she had been, apparently without any good reason, for upwards of three weeks. She complained of solitude; and her apartment was by no means clean, or well-aired."

" N° 25.—Madhouse kept by *John Stewart*, at Rose Bank, near Currie.—
2 Patients.

" The situation of these patients is sufficiently comfortable."

" Independent of the Observations before made, as applicable to each of the houses above specified, it is generally observable with respect to such houses, with a few exceptions :

" 1. That no pains are taken towards affording *employment* to the patients; a matter viewed of the last importance towards the comfort and recovery of insane persons. As to the males, it so happened that the Reporter in no one instance found any of them occupied; and in very few instances did the females appear furnished even with means of employment by sewing.

" 2. That the keepers receive too many patients, considering the nature of the accommodation they possess, and the number of the under-keepers whom they employ.

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employ. This leads to the confinement suffered by some, and the unnecessary restraint to which others are subjected.

" 3. That no attempt to classification is made. Where numbers are put into the same room, this is done without discrimination or regard to the circumstances of the patients, or the degree of disorder under which they respectively labour. By far the greater part of these unhappy persons are, however, confined to their own apartments, into which they are constantly locked, and where, without air, exercise, employment, or society, they waste the most wretched existence that can well be imagined.

" 4. There is a total want of medical attendance, either for mind or body. The keepers seem to ridicule the idea that medical aid can be beneficial in a mental disorder, and never think of employing it. Indeed, in most cases, the circumstances of the parties do not admit of their defraying this most necessary expense."

" Besides examining the foresaid Private Madhouses, the Reporter also felt it his duty to visit the Public Asylums in this county; and accordingly he inspected, 1st, *The Cells connected with St. Cuthbert's Poor-house*, in which he found two men and sixteen women confined. These cells are nineteen in number, of which eight are on the ground floor, and eleven up-stairs. The cells are eight feet long, by five feet wide and seven feet and a half high. There is a window to those below, thirty-two inches broad by sixteen inches high; iron stanchioned, with a wooden shutter hinged at top, not glazed. There are three or four oblong narrow holes in the shutters, to admit some air and light when the shutters are down. The upper cells are on each side of a narrow passage, and the only admission of external air within, is by a hole in the wall occasionally stopped by a cloth. Though most of these holes are open, and not half the patients within them, the air was most unpleasant and close. When all are confined, and the holes stopped, it must be bad indeed. A small pane of glass in the roof gives light to these upper cells. In so far as depended on the keepers, every thing appeared clean and well ordered; and there was no restraint applied, except the confinement of some of the patients to their cells. The airing-ground is only about thirty-six feet square; and the accommodation on the whole very inadequate, either for the recovery or comfort of those confined. In March, the number confined in these cells was four men and sixteen women.

" 2d. *Edinburgh Bedlam*:—In September, the numbers here confined were seventeen men and thirty women. In March, there were thirteen men and thirty-seven women. These patients appeared in general to belong to the lowest rank of society, and to be mostly afflicted with the disease, to a horrible degree. There can, however, be no doubt that every attention is paid to them personally, as they are almost daily visited by Mr. Thomas Wood, surgeon; but the accommodation appears defective in the extreme. Some apartments have indeed been lately added, which are occupied by females, and are roomy and well ventilated, but the old part of the cells are cheerless, ill-aired, and dismal to a degree. There are twenty cells on the ground floor, which are damp, and where the patients in winter must suffer severely from cold. A great part of these are attached to the old city wall, have no fire-places or means of heating them, nor any building above or below them. They are lighted and aired solely by openings in the door by which they are entered, and which doors again open into the court-yard, in which the other patients walk. The noise and cries which issue from these cells, must thus be dreadfully distressing to the other patients. When the Reporter was present, one woman in a state of high delirium, continued to stretch her arms out of the foresaid opening in the door of her cell, in the most frantic stile, and to utter such terrific cries, as to render it almost impossible for any person to remain in the court-yard for any length of time. When such is the nature of the accommodation, it is in vain to expect that the attention of keepers, or the care of medical persons, however unremitting, can tend much to the comfort, and still less towards the recovery of the unfortunate patients here confined."

" 3d. *Lunatic Asylum, Morningside*:—Thirteen males, nine females; in March, fourteen men, five women. Every thing seems here done that assiduous attention on the part of the Directors, Medical Attendants and Keepers, can insure. The Managers are gentlemen of the highest respectability in the city of Edinburgh; and the first medical advice which that metropolis affords, is most liberally and unremittingly afforded. But the accommodation is at present so defective, as in a great measure to defeat the object which those exertions are calculated to attain. The only part of the edifice hitherto erected, exclusive of the keeper's house, are two small buildings intended as wings for a larger edifice; one of these is dedicated to females, the other to males. The number of the former being small, and being more easily managed than the males, the keeper has accomplished a classification of them, by making use of a part of his own house for their day-rooms. The Reporter accordingly found there three females in a state

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state approaching to convalescence, comfortably seated at work in a good parlour, whilst the others occupied another room in the upper floor.

" But with respect to the men no such classification is practicable, there being only one apartment suited for a day-room in the building destined to them, where the Reporter accordingly found the above thirteen males. This arrangement is extremely faulty, though at present unavoidable.

" 1st. With a view to the present comfort or future recovery of these patients, it must be most injurious to those who are at all capable of judging of their situation, to find themselves classed along with persons labouring under the most distressing symptoms of the disorder. To a convalescent, such a sight would seem sufficient to throw him back to his former state. Amongst the above thirteen there seemed at least four or five whose state of mind was most materially different from the others, and whose condition seemed aggravated to a great degree, by the presence of the companions with whom they were thus associated.

" 2nd. By the want of this classification, a great mean of discipline, or rather of inducing the patients to acquire a controul over themselves, is lost. Where an apartment is allotted for those who are recovering, or who conduct themselves with propriety (accompanied as it ought to be with some additional comforts and a certain degree of freedom) it will be always a desirable object among the patients to be included in the number of those who have access to it. Hence, those who are excluded from it will exert themselves so as to have a claim for admission; whilst the fear again of being excluded, will have a no less powerful effect over the conduct of those who have once obtained access."

" It may however be proper to mention, that since the date of the foresaid inspection, means have been proposed to be taken towards constructing another day-room for those patients."

" From the foregoing statement it appears, that there are *three* public establishments in the county of Edinburgh for the custody of Lunatics, in which there are at present confined thirty-one males, and fifty-eight females."

" Secondly. That there are twenty-five private Madhouses, in which there are confined 50 males and 72 females; in all 81 males and 130 females—Total 211."

In addition to what is contained in the quotation now given, it is proper to add, that of the three public institutions, the one at Morningside was alone created by charter; the other two are merely appendages to parish workhouses. The former is also the only Madhouse within my jurisdiction that has been built specifically for the purpose; and, as already noticed, only a small part has been as yet constructed, owing to a deficiency of funds. Before any material addition be made, it is to be hoped the plan of the building will be reconsidered, as at present it appears objectionable in many points.

With respect to the treatment of the disease of Insanity, as one that may be cured by medicine contrasted with management, no such custom or idea has been found to exist; and with the exception of Madhouse, No 11, of the foregoing list, no medical attendance seems ever to be had recourse to in any private Madhouse, unless in cases of very serious bodily disease.

After the detail already given, it seems superfluous to resume the instances of improper treatment or conduct on the part of the keepers of these houses. On the whole, the accommodation and treatment of Lunatic patients in this county (with a very few exceptions) appeared to me to be such as to call for my decided disapprobation.

Query 4th.—" What is the condition of pauper lunatics, and what provision is made within your jurisdiction for their reception, maintenance and treatment?"

Answer.—Paupers of this description are legally in the same condition as those that are sane. The burden of their care and maintenance falls on the parish to which they belong, and which in general makes the cheapest bargain in its power with any Madhouse-keeper willing to receive such a patient. The board being thus unreasonably low, and there being few persons interested about a lunatic of this description, the keepers seem to consider such patients as noways entitled to the same accommodation or care that is bestowed upon others. In no instance did I find a pauper lunatic treated with kindness; in several, marked inhumanity was observable.

Where a pauper belongs to the city of Edinburgh, he is received into the Charity workhouse cells, and if to the West Church parish, he is received into the cells connected with that parish workhouse; all others are settled in private Madhouses."

Query 5th.—" Have you made any and what rules and regulations for the management of the lunatics within your bounds, agreeably to the power vested in you by the Lord Advocate's Act of the last Session."

Answer—

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Answer—I have not made any such general regulations, and do not consider the attention I have as yet paid to the subject, sufficient to qualify me for such a task. Besides, the nature of the accommodation, and the circumstances of the patients are so very different, that I doubt if any general set of Regulations could be made to apply to the whole of them. I have, however, in every case, marked what appeared wrong, and enjoined the keepers to remedy the defect in such manner as circumstances seemed to admit of; and I in general found my instructions afterwards attended to.

Query 6th.—“What was the power of the Magistrates in Scotland, relative to the confinement of insane persons, and the inspection of Madhouses, previous to the passing of the foresaid Act?”

Answer—The Magistrates had the same power as at present, in so far as relates to the securing the person of a lunatic going at large, and occasioning risk to the public. And on information as to any person being unduly detained in a Madhouse, he could cause all necessary measures to be taken, by bringing the person before him, or otherways, for ascertaining the fact, and leading to the deliverance of such person, if proper. But I conceive he had no right, previous to the Lord Advocate's Act, to insist on admittance to a private Madhouse, so as to examine the state thereof, or at all to interfere in its management; and until this last year, it is believed that nothing of the kind ever was attempted.

Question 7th.—“What is the power of the Court of Justiciary, with respect to the commitment of lunatic convicts in any of the Madhouses of a public nature.”

Answer.—I have reason to believe that the Court of Justiciary has no such power. At the Assizes at Aberdeen in 1815, that Court granted warrant to commit an insane convict to the public asylum in that town. But the managers afterwards resisted the order, for the purpose of trying the point of right, as the Court of Justiciary have become satisfied that they are not invested with any authority to the foresaid effect, and that their power only extends to the commitment of such convict to gaol, or intrusting him to the care of his friends.

Question 8.—“What suggestions have you to make relative to the improvement of the different kinds of Madhouses in Scotland, and what alterations in and additions to existing enactments appear to you to be necessary, or likely to be beneficial.”

Answer.—In a communication I some time ago made to Lord Binning, one of the Committee for Madhouses, I suggested the propriety of certain asylums being constructed at public expense, chiefly for the custody of the poorer description of lunatics; and to that communication I now beg leave to refer; and have only to add, that I am more and more convinced, that this must form a part of any scheme for the improvement of Madhouses in Scotland. Regular inspections of such houses will certainly do good; but that alone will not answer; because if those rules, which according to the improved mode of treatment of this disorder are found to be so conducive to the comfort and recovery of the insane, are positively enjoined, the circumstances both of the patients and of the keepers are in many instances such, as to render the observance of such totally impracticable: And the consequence must be, that such keepers would resign their charge, and there being no public asylums to receive the patients, these unfortunate persons would be left in many instances to go at large, to the great hazard of themselves and of Society. Whereas, if public asylums were established ready to receive such patients, the most strict Rules as to the management of private Madhouses, might not only be established, but most rigorously enforced; and if the consequence of this was to put down a number of these houses, it would prove a very beneficial result.

In the communication now referred to, I suggested the propriety of four such asylums being established in Scotland. From inquiries I have since made, I am, however, led to believe, that the number of insane persons in confinement in Scotland greatly exceeds what I then supposed; and as there seem to be strong objections to such institutions being of too extended a nature, I would not wish to be understood as recommending at present any precise number of such asylums, but as leaving that to be fixed when, by an accurate return of the number of insane, the extent of accommodation wanted can be correctly known.

London, }
April 26, 1816. }

All which is humbly related by
W^m RAE.

Appendix (B.)

ANSWERS by the Sheriff Depute of the County of Forfar, to the different
 QUERIES transmitted to him by order of the Parliamentary Committee
 on Madhouses.

Query 1.—THERE are only two institutions for the reception of insane persons within the county of Forfar; viz. The Royal Lunatic Asylum of Montrose, and the Lunatic Asylum at Dundee; both of these asylums were built by subscription, for the special purposes of receiving lunatics. The Montrose Asylum was built in 1781, was opened in 1782, and the managers in 1811 obtained a royal charter, constituting and erecting them into a body corporate and politic, with perpetual succession. The foundation stone of the Dundee Asylum was laid in September 1812, and though only part of this asylum has been built, this part is sufficient to accommodate 40 patients. From a deficiency of funds, however, the managers have as yet been prevented from purchasing furniture for their asylum, and preparing it for the reception of patients.

There are at present 53 patients in the Montrose Asylum; of these 33 are poor patients; the other 20 are in the middling situation of life.

Query 2.—In consequence of the late Act of Parliament, I visited the Montrose Asylum in September last; and since these queries have been transmitted to me, I have visited both the Montrose and Dundee Asylums, in the course of this present month.

Query 3.—The Lunatic Asylum at Montrose was built by subscription in 1781, and is situated in an airy situation in the Links of Montrose. It was for a long time supported by funds annually granted by the magistrates of Montrose; by annual collections at the church and episcopal chapel of Montrose; by annual contributions and voluntary donations of the liberal and humane; and by occasional collections at different parish churches within the synod of Angus and Mearns. The annual income of the Asylum consists of the interest of money belonging to the Asylum, and of the boards paid by the patients; and in consequence of the liberality of the subscriptions for upwards of twenty years, and the attention of the managers to the funds of the Asylum, this income is now rather more than sufficient for defraying all the annual expenses. For these some years past, therefore, there has been no necessity for any annual subscriptions or collections at churches; and the only assistance received from the public, has consisted of occasional donations and legacies.

Montrose Asylum.

Besides accommodation for the lunatics, the Asylum contains a dispensary and a small infirmary. The buildings and furniture are valued at 3,100*l*.

For many years after this Asylum was built, it was the only one of the kind in Scotland. Within these ten years past, the attention which is due to the comfort of the insane, has attracted more general consideration than what it previously had done. This Asylum therefore, which has now been erected for 35 years, and to which different additions have been made since it was first built, cannot be supposed to be a model for establishments of this kind, though every attention was paid to the construction both of the original building, and of the subsequent additions.

Besides a part of the house allotted for the infirmary patients and the dispensary, there are at present allotted for lunatics, the following apartments;

Accommodation
 allotted to Lunatics
 in the Montrose
 Asylum.

In the Main House	17
In the North Wing	7
In the South Wing	9
	33

All these 33 apartments appear to me to be, in every respect, comfortable and unobjectionable.

In the lower floor of an adjoining outhouse, there is a large room divided into three different divisions, where eight idiots are accommodated. In the upper floor of this outhouse, there are six apartments for lunatic patients, which, though small, are well ventilated, and do not appear to me liable to any objection.

A very large garret extending over one-half of the main house, has been divided by wooden partitions into eight different apartments. These apartments are kept very clean, and though small and confined, are well enough ventilated in winter. I should suspect, however, they are rather close and warm in summer; but this inconvenience is the less felt on account of the patients having the use of the day-

rooms,

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rooms, airing-ground and garden. I am also inclined to object to these apartments, on account of the noise made by a patient in one of them being easily heard, and being troublesome to the patients in the others; but I am informed that on this account they are allotted to quiet patients.

These eight apartments were solely fitted up on account of the many pressing applications for patients being received into this Asylum, at a time when there was no other asylum of the kind in Scotland. The Managers themselves are of opinion, that these apartments are not so comfortable as could be wished; they therefore have, for these three or four years past, intended to obtain additional accommodation for lunatic patients, by either building an additional house for lunatics, or by appropriating for lunatics the whole apartments at present allotted for the sick patients on the infirmary establishment, and building a new infirmary. But before laying out their funds in new buildings, the Managers have thought it proper to wait until the new lunatic Asylum at Dundee has been opened. In this respect I concur with the Managers; for I am of opinion that the number of patients in this asylum will decrease, when the new Asylum of Dundee (which is only thirty miles distant from Montrose, and within the same county and synod) is opened. The nature and extent of any additional buildings at Montrose must therefore entirely depend on the effect of the Dundee Asylum in decreasing the number of patients in the Asylum at Montrose.

Day-Rooms.

Besides the apartments already mentioned, there are three day-rooms; one for men, one for women, and a small one for patients in a better station of life who are convalescing.

Airing-Grounds
and Gardens.

Until lately there was only one airing-ground and a garden belonging to the asylum at Montrose. The airing-ground contains about half an acre, and was in general open to all the patients indiscriminately; though sometimes orders were given for the patients of the one sex being in the airing-ground at different hours from those of the other. The patients are also allowed to walk in the garden, which contains an acre and a half of ground. Of late two additional airing-grounds were taken in, the magistrates having given ground for that purpose from the adjoining part of the Links. These additional airing-grounds will be completely finished before the beginning of June; the former airing-ground will then be allotted for all male patients. One of the new airing-grounds, which is 93 feet by 40, will be allotted for convalescent males, and the other airing-ground, which is 156 feet by 40, will be allotted for the female patients. All the patients will still be allowed to walk in the garden as formerly.

About eight or ten years ago the Managers of this Asylum were of opinion, that more patients were received than could be properly accommodated; they therefore established a regulation, that no more than 55 patients should be received; and although the eight apartments in the attic or garret of the main house are rather small and confined, the physicians attending the asylum are of opinion, that considering the airy situation of the house and airing-grounds, patients can be accommodated in these apartments without any detriment to their health.

I am, however, of opinion, that these apartments are rather close and confined in summer, and uncomfortable on account of patients in these apartments being easily annoyed by any noise which may be made by any of the patients there confined. In every other respect, however, I have no hesitation in reporting, that the part of the buildings allotted for the reception of lunatic patients is of sufficient extent for the number of persons therein confined; that the building is well aired, the apartments in every respect properly kept, and the accommodation such as has called for my approbation.

Medical attendance
and Medical treat-
ment

I have also every reason to consider the medical attendance as sufficient. There are two physicians attending the house. The attention of one of those is principally directed to the lunatic patients, while the other attends to the patients on the dispensary and infirmary establishments. The superintendent acts as apothecary. I am informed by the physicians attending the Asylum, that they have found little effect produced by medicines or drugs in curing insanity, particularly when it appears in the form of melancholy or idiotism; and they are of opinion that the cure must chiefly depend on proper regimen, on the general regulation of the passions and affections of the mind, and on proper coercion when necessary. In order therefore to relieve the languor of idleness, and prevent the indulgence of gloomy sensations, such of the male patients as chuse to work are in summer employed in the garden. The females are much employed in spinning flax, and those who can enjoy such amusement, are allowed to read, draw, or play at draughts or cards, but never for money.

The only modes of coercion are the pinion, strait-waistcoat, and a clasp fixed by a chain to the wall near the foot of the bed, and fastened round the ankle of a male patient. This last mode of coercion, however, is but rarely resorted to, and only adopted when it is rendered necessary for the security of the patient himself.

The

The servants of the Asylum are, a superintendent, a matron or housekeeper, four male and two female assistant keepers. The superintendent has been in that situation since the first institution of the establishment. He has always been remarkable for gentleness and humanity to the patients, and has evinced a peculiar ingenuity in managing the most furious lunatic, without using severe measures. The character of the matron is also unexceptionable. I am also informed that the under-keepers are attentive; and I have never heard of any practices evincing either negligence or inhumanity on the part of the keeper or his servants.

I have already stated, that some years ago the Managers were of opinion that more patients were admitted into this house, than could be properly accommodated. I am informed, that in June 1805, there were 59 lunatic patients in this Asylum; and I subjoin a note as to patients who have been admitted, cured, relieved, removed, or who have died in the different years since June 1805.

	Admitted.	Cured.	Removed as convalescent, having been relieved.	Removed by their friends.	Dead.	Remaining June 1814.
In the House, June 1805 -	59	—	—	—	—	—
June 1805 to June 1806 -	11	2	3	4	2	—
— 1806 - - 1807 -	5	1	5	0	2	—
— 1807 - - 1808 -	6	0	0	0	2	—
— 1808 - - 1809 -	6	3	2	0	5	—
— 1809 - - 1810 -	10	2	2	0	4	—
— 1810 - - 1811 -	9	3	0	0	4	—
— 1811 - - 1812 -	6	4	3	0	8	—
— 1812 - - 1813 -	19	8	0	0	6	—
— 1813 - - 1814 -	10	8	3	0	2	—
— 1814 - - 1815 -	13	3	7	1	1	54
	154	34	25	5	36	54

That part of the Dundee Asylum which has been built, appears to me to have been constructed with every possible attention to the accommodation and comfort of the lunatics who may afterwards be confined in it; and I have only to regret, that the want of funds has hitherto prevented the managers of the Dundee institution from opening their asylum.

Dundee Asylum.

Query 4.—The charge of pauper lunatics devolves on the parish to which they belong, and the expense is defrayed out of the parochial funds. The only provision for the reception and maintenance of pauper lunatics within the county of Forfar, is contained in the bye laws of the Montrose Lunatic Asylum, which on account of the very liberal contributions of the town and parish of Montrose to this Asylum, and of the collections at the churches of the different parishes within the bounds of the Synod of Angus and Mearns, provide:

1st.—That the town and parish of Montrose is entitled to have ten lunatics kept gratis in the Asylum. These patients must have resided at least five years in the town or parish of Montrose.

2dly.—That the town or parish of Montrose may have other four lunatics kept in the Asylum, at the rate of 10 £. for each. These patients must have resided at least three years in the town or parish of Montrose.

3dly.—That other four patients may be admitted at the rate of 12 £. each; provided their boards are paid by Kirk Sessions within the Synod of Angus and Mearns, which Synod comprehends the whole of the county of Forfar, the greater part of the county of Kincardine, and a few parishes of the county of Perth.

4thly.—That other lunatics within the Synod of Angus and Mearns may be admitted at the rate of 18 £. per annum; whereas lunatics not residing within the said Synod cannot be received under 24 £. per annum, or a higher sum if their circumstances can afford it.

Query 5.—I have made no rules or regulations for the management of lunatics within the county of Forfar. No licence has as yet been taken out for any private Madhouse

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(B.)

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Madhouse within the county; and by the 17th clause of the late statute it is specially provided, "That nothing in this Act contained shall extend, or be construed to extend, to any of the public hospitals or public lunatic asylums in Scotland, further than to authorize the said sheriffs or stewards to visit and inspect the same, or to order such inspection as aforesaid."

The first time, however, that I visited the Montrose Asylum, I suggested my doubts as to the eight apartments in the garret of the main house. I have already stated the cause of these apartments having been fitted up. I feel it would be difficult, if not impossible, for the managers, previous to the opening of the Dundee Asylum, to refuse receiving into their house patients who can be accommodated in those apartments; and I think it would be improvident in the managers of the Montrose Asylum to build additional buildings, until from the effect produced on the Montrose Asylum, by the opening of the Dundee one, the nature and extent of the additional buildings required for Montrose is distinctly ascertained.

Query 6.—Previous to the passing of the late Act of Parliament, all sheriffs magistrates and justices were not only entitled, but were also bound for the safety of the public, to prevent lunatics who were furious from going at large. A petition therefore for having the furious person secured, being presented to a magistrate, he granted a warrant for committing the furious person to jail, till security was found for his being kept in such a manner as to be prevented from doing mischief to himself or others. The petition was in general accompanied by a certificate from a medical gentleman, certifying the insanity of the person complained of; if otherwise, the magistrate immediately, on the furious person being lodged in jail, directed a medical gentleman to visit him, and the prisoner was immediately liberated, if the medical gentleman reported that he was not furious or likely to do mischief to himself or others. On the prisoner's friends finding security for his being properly kept, he was delivered up to them. If no such security was found, he was detained in jail until he could be placed in the Asylum at Montrose or some other proper place, at the expense of the parish to which he belonged; in which case authority for his removal was granted by the magistrate under whose authority he had originally been committed.

There is at present one pauper lunatic detained in the jail of Forfar, on account of his friends not finding security for his being properly kept; and different instances have occurred, of furious persons having, for the same reason, been long detained in jail, until proper security was found by their friends.

The aliment of furious persons in jail, is defrayed by the parishes to which they belong, unless when such parish is unknown; in which case the aliment must be advanced out of the county rogue money, until the parish liable in alimentering the pauper lunatic is discovered.

Sheriffs seldom or never take notice of any lunatics, except such as are subject to fits of fury, and therefore likely to do mischief to themselves or others.

I am of opinion, that previous to the late Act of Parliament, a sheriff was entitled at common law, to inspect any Madhouse, on a complaint being made to him, either that an insane person was not properly treated, or that a sane person was confined in the Madhouse, on the pretence of insanity. The sheriff was, at common law, entitled in the first of these cases, to give directions for the removal or proper treatment of the lunatic; and in the second, for the liberation of the sane person; who, besides being thus liberated, might immediately have raised an action of damages against all those who had in any respect been accessory to his being improperly confined.

Queries 7 & 8.—The court of justiciary has no power to order any lunatic convict to be imprisoned in a lunatic asylum, built by public subscription. A lunatic convict is in general therefore sentenced to be confined in the jail of the county to which he belongs, until his friends find security for his being detained in some proper place, in such a manner as to be prevented from doing any injury to himself or others. The friends of a poor convict are seldom able to find proper security, and therefore instances have occurred of lunatic convicts having been long detained in jail.

In Answer therefore to Query 8th, I beg leave to suggest that the law in this respect ought to be altered; and I feel myself the more warranted in this suggestion, as in a conversation on this subject with the Lord Justice Clerk of Scotland, in reference to these Queries, his Lordship informed me, that in the opinion of the Lords of Justiciary, their Lordships were not entitled to order a lunatic convict to be transmitted to any public lunatic asylum.

At present, for the preventing of future mischief, lunatic convicts are either detained in the common county jails, where some of them are kept in situations shocking to humanity; or they are delivered to their relations, on security being found

found for their future restraint. Both these plans are objectionable. Whether the comfort of the unfortunate lunatic himself, or the interest of the public be considered, a jail is an improper place for a lunatic. It does not afford any accommodation for his cure or his comfort. It tends to aggravate his sufferings and increase his disorder. The noise he may make in jail, and his screams, not only inflict additional hardships on the other prisoners, but (on account of most of the jails in Scotland being in the principal streets) do also sometimes annoy the public.

On the other hand, lunatic convicts delivered up to their friends, have sometimes been placed in such situations as in no respect to afford to others labouring under insanity a warning against the commission of future crimes. In every well-regulated state, proper places should be provided, both for the reception of criminal lunatics, and for regulating the restraint to which they should be subjected with regard to diet, air, drink, exercise and other circumstances; and there is good reason for believing, that with some of these lunatics the dread of solitary confinement for life would be no inconsiderable bar to the commission of crimes.

I am therefore humbly of opinion that there should be built, in different parts of Scotland, three or four different Asylums for the reception of lunatic convicts, and of lunatic paupers, now for the public security detained in our jails, under the warrants of our Magistrates; or (if the plan is thought too expensive) that a wing with additional cells, at the expense of the public, should be attached to some of the lunatic asylums in Scotland. These cells should be under the superintendence of the ordinary managers, physicians, and principal keeper of the asylum to which they are attached, but they should be detached from the main part of the asylum, and should have separate airing grounds and separate under-keepers. The expense of detaining these convicts in these cells, and of their aliment, could either be defrayed by the public at large, and paid by the collector of the county out of the public monies in his hands, or might be raised by an assessment on the county or parish to which the convicts respectively belonged.

I also beg leave to suggest, that all lunatic paupers who at present are committed to jail until security be found for their being kept in such a manner as not to do mischief to themselves or others, should, on their friends not coming forward with proper security within two months after their being confined in jail, be removed to the cells built at the public expense, and therein detained at the expense of the parish to which they belong.

Forfar,
27th April 1816.

ADAM DUFF,
Sheriff Depute of Forfarshire.

Appendix (B. N° 1.)

BYE-LAWS of the Royal Lunatic Asylum of Montrose:

1. IT is enacted, That previous to the admission of any person into the hospital, labouring under insanity, a petition shall be presented to the managers at their monthly meeting, setting forth the name and residence of the person, and nature of the case; and along with the petition, a certificate of lunacy under the hand of two medical gentlemen: That in case of admission, the meeting shall fix the rate of board to be paid by the patient, for which, and also for furnishing bedding and body clothes, removing him or her from the hospital when required, and, in the event of death, defraying the charges of the funeral, an obligation by one or more responsible persons shall be obtained.

2. In all urgent cases, excepting always that of paupers, patients may be admitted betwixt the monthly meetings, by an extraordinary meeting of the managers called for that purpose, on production of a certificate of lunacy, and a certificate of urgency, signed by one or both of the medical attendants, and a quorum of the House Committee; the boards of such patients being fixed by the next monthly meeting, which extraordinary meeting may be convened upon three hours previous notice.

3. That as the town and parish of Montrose contributed liberally to this charity, the poor lunatics belonging thereto shall be admitted gratis, and kept while the funds will permit. But there shall not be, at any one time, more than ten gratis patients in the hospital, to which number they are hereby specially restricted. And hereafter no gratis patients shall be admitted unless they have resided in the town or parish of Montrose for five years at least: That four patients may be

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admitted from the town or parish of Montrose at 10*l*. per annum, provided always their circumstances require it, and they have had their residence therein for three years at least.

4. That poor lunatics from towns or parishes, which contributed to the erection of the institution, shall be received in preference to, and at lower rates than others; and where applications from different towns or parishes which contributed to the erection of the charity, shall happen to be presented at the same time, regard shall always be had to those which contributed to the greatest extent.

5. No lunatic, who does not reside within one or other of the parishes in the Synod of Angus and Mearns, shall be received under 24*l*. per annum, or more, should it appear that their circumstances will afford it; and no person within that distance, including the town and parish of Montrose, shall be received under 18*l*. per annum. But notwithstanding the foregoing rates of board, it shall be in the power of the managers to admit patients to the number of four, at 12*l*. per annum, where their boards are paid by kirk-sessions within the said synod: But it is expressly declared, that no more than four patients at that rate, and paid for as aforesaid, shall be in the house at one time.

6. That when lunatics shall, in the opinion of the medical attendants, appear to be so much recovered that they should be removed, it shall be the duty of the clerk, upon being informed by the keeper, to apprise their friends thereof, that they may take them out upon trial; their places being always kept open for two months, in case it shall be found necessary to send them back.

7. That a register shall be kept, in which the name, age, place of residence, and event of the case of every lunatic, shall be entered by the medical attendants; which register, with all others belonging to the institution, shall be always open and patent to the inspection of any of the managers.

N. B.—At no time shall there be more than fifty-five patients in the house, unless additional accommodation is provided.

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Medical Report of the Hospital, for the Year preceding 1st July 1815,
by Drs. Gibson and Henderson, the Physicians in attendance.

LUNATIC ASYLUM.

Patients in the house, at 1st June 1814	-	-	-	-	53
Admitted betwixt that period and 1st June 1815	-	-	-	-	13
					— 66
Whereof cured	-	-	-	-	3
Discharged, on trial	-	-	-	-	7
Removed	-	-	-	-	1
Dead	-	-	-	-	1
Remain under cure	-	-	-	-	54
					— 66

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Appendix (C.)

ANSWERS by ROBERT HAMILTON, Esquire, Sheriff Depute of Lanarkshire, to the QUERIES of the Committee of the Honourable the House of Commons on Madhouses.

1st.—THERE are no private Madhouses within my jurisdiction; but there are two public institutions for the reception of lunatic or insane persons, both in the city of Glasgow:—1st. *The Glasgow Asylum for Lunatics*, the building of which was begun in August 1810. And 2d. *The Town's Hospital of Glasgow*, or more properly, certain cells adjoining to that building. The first of these was built expressly for the purpose to which it is now put; and the second of these, namely, the cells, were constructed many years before, also for the purpose of receiving and keeping lunatics and idiots in a state of *pauperism*, and connected with the city.

The *Glasgow Asylum* was begun and completed by subscription from public bodies and individuals in Glasgow and the contiguous country, without any act of parliament or charter or aid from the public purse. The contributors elected a number of managers who, after many meetings and much deliberation, drew up a plan for the future management of the asylum. This plan was laid before a general meeting of contributors, who unanimously approved of it, ordered it to be printed and published as the Constitution of the Glasgow Asylum for Lunatics; and, on proper application, they obtained from the magistrates of Glasgow a charter or seal of cause. A printed copy of this Constitution is sent herewith, being No. 1, and authenticated by my initials.

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This asylum was opened for receiving patients on 12th December 1814; and it was from the first, and is still applied specifically to its destined purpose, the reception, accommodation and cure of the insane: Of these 149 have been admitted, and two that have relapsed have been re-admitted; three have died; 49 have been dismissed cured; 17 relieved, and six removed for idiocy, or other circumstances which rendered it expedient to remove them. At present there remain in the asylum 76 patients; namely, 43 men and 33 women.—Of these, 41 are paupers at 8s. a week; eight are working-people at 10s. 6d. a week; 21 of better condition, pay 15s.; four pay a guinea, and two pay a guinea and a half. Of the patients admitted, 76 have been deranged for many years, notwithstanding which several even of these have been dismissed cured, and continue well; affording a strong presumption that one year (the period specified in some institutions) is a term too short for ascertaining fully either the nature of the malady, in every instance, or the impossibility of curing it.

The directors of the institution in the *Town's Hospital* for the reception and use of lunatics, are not aware, nor do they know of any act of parliament or royal charter having been granted for the erection of it, or of the cells adjoining to the hospital. The whole buildings were erected, many years ago, by subscription from the public bodies and inhabitants of the city of Glasgow; that part of the building which had heretofore been used for the reception of *lunatics* has not, since the erection of the new lunatic asylum above-mentioned, been so occupied, but by *fatuous* persons merely, and others requiring temporary confinement. The persons entertained in this receptacle are all in the state of paupers. Some of those, originally transmitted to the new asylum upon its being opened, have been dismissed from thence as incurable, as being in or as tending to a state of idiocy, and of whom no hopes of cure were entertained. The numbers at present are men 14, women 12; total 26.

2d.—In the month of October last I visited and inspected the Asylum for lunatics and the cells of the Town's Hospital of Glasgow, attended by a committee of the magistrates and four gentlemen of the faculty of physicians and surgeons in Glasgow, agreeable to the statute 55 George III. chapter 69, for regulating Madhouses in Scotland. My substitute at Glasgow has visited the institutions in the month of April last, and I shall again visit them in the course of the approaching autumn.

3d.—In regard to the *Asylum for Lunatics*, I have to report, that though the present condition of the institution is as prosperous as could have been expected, it is still loaded with a debt of 3,000*l.* and much remains to be done before it can be completed. If there were funds, an addition would be made to the building immediately, as it is already needed for paupers; and a separate building for idiots, and noisy patients, who disturb all but idiots, would be erected at a little distance, for both of which admirable plans have been most elegantly drawn by one of the cured patients.

The Asylum is managed with every possible attention to the comfort of the patients, in the first instance, and ultimately to their recovery. There is one physician only, but no want of medical attendants has been felt. He is bound to
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visit the Asylum at least three times a week, to examine all the patients at least once a week; and when any seem in particular danger, to visit them daily. Every visit, with the time of making it, is marked in a book always open to the inspection of the weekly committee. On numbering the physicians visits from January 1st, 1815, to January 1st, 1816, they amount to somewhat more than nine in the fortnight; and he most commonly inspects all the patients three times a week.

The superintendent, who studied medicine, and was five years resident apothecary in St. Luke's, has hitherto acted as apothecary and house-surgeon.

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There is no general process of indiscriminate bleeding, vomiting or purging, at stated periods of the year, or of the month. When any application for admission is made, printed queries are sent to the friends of the person. A copy of these is herewith sent, being N° 2, and authenticated as the former. From the answers to these, and from collateral information carefully sought after, as soon as the patient arrives the superintendent writes his case, kept in a book for the purpose. After reading this, and carefully examining the patient, the physician prescribes the remedies and regimen which he thinks most proper for each; the prescriptions are marked in the case book, together with their effects, any changes that occur in the disease, the remedies as the regimen, and the event of each case. The reports are taken at longer or shorter intervals, according to each case; such remarks as occur are added at the close, as also the directions furnished to the patients who leave the Asylum; and the case books regularly numbered are carefully preserved.

As the physician thinks medicine of little use in every insanity, without proper regimen, he uniformly combines them, and while he attacks dangerous symptoms by prescribing proper remedies: for instance, costiveness, by purgatives—inordinate action in the vessels of the head, by taking away blood—by shaving the head—by cold epithems where the heat is excessive, by stimulating liniments or blisters; no effort is spared to secure and follow up the advantages occasionally gained from proper remedies, by the use of frequent baths, of proper food, of cleanliness and due exercise, both of body and mind. The annual reports shew that the success in this institution has not been inferior to that in most others. The 1st and 2d Annual Reports, N° 3 and 4, authenticated as before, are herewith sent. Several of the keepers have been found guilty of negligence or improper conduct, but they were speedily dismissed; and so long as the present vigilance shall continue, abuses must either be prevented or very speedily checked. Besides the physician who visits every patient often, and the superintendent and matron who see them several times every day, visitors are appointed, one of whom at no stated hour, examines every part of the Asylum twice a week at least, or every day if he chooses it, and he marks every thing worthy of notice in a book kept for the purpose. This book, always open to every manager, is regularly examined by the Committee, which meets every Saturday, to examine the transactions and occurrences of the past week. Of these meetings regular minutes are kept, and laid before a General Meeting of Managers, who meet once a quarter; and the minutes of the quarterly meetings are annually laid before a General Court of Contributors, convened by advertisement in the newspapers, together with the annual report of the managers; and this report, when sanctioned by the General Court, is published by itself in the newspapers.

The utmost exertions are made in every quarter, to secure the universal exercise of humanity. Except seclusions from the public room, and personal confinement where that is found indispensably necessary, or an abridgement of some indulgence in diet or amusement, no punishment is allowed to be inflicted on any patient, unless in case of sudden attack, which however has very seldom happened. In such cases the keeper is of course allowed to repel the attack, and as soon as the patient is overpowered, the facts are reported to the superintendent and to the physician, who proportion the punishment, which consists entirely of confinement and privations, without the slightest corporal punishment, to the nature of the offence.

The asylum has room for a hundred patients, but has never hitherto had more at one time than ninety-two.

The galleries, day-rooms and bed-rooms are most perfectly ventilated, kept extremely clean and properly heated, by a method which at once secures ventilation, and prevents the risk of fire.

Each ground floor is heated by a furnace on the ground floor. The flue passing under the pavement of the cells, returns below the centre of the gallery, and ends in a perpendicular flue. Thus the lowest cells are kept free from cold or damp, even in the depth of winter.

All the apartments on the upper floors where there are no open fire places, are heated by means of air thrown into them from two iron cockles, sufficiently heated by a well-constructed furnace. The form of each cockle is the frustum of a pyramid four feet square at the base, five feet high, forming a surface of about 75 square feet. The furnace is so constructed that no air can get from it to the outer surface of the cockle, which is surrounded with brick work at some distance from it, open
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at the sides for admitting external air, which is admitted in greater or smaller quantity, according to circumstances, and arched above with one opening. This opening conveys from each cockle the air heated and rarified, by impinging against its sides, which are heated enough to warm the air, without decomposing or vitiating it, into two circular wells, each four feet diameter, from whence, by proper flues, it is distributed into each apartment. The openings into each apartment are furnished with valves, which can be shut at pleasure, or opened, from the smallest segment to the complete circle. Thus the apartments are kept not only warm, but uncommonly sweet; and it is in contemplation to render them even fragrant, by suspending near the opening which admits the external air, some aromatic plants in small nets, whence the air of every apartment will be perfumed.

Every patient fit for it, is not only allowed but urged to enjoy the open air in good weather, by walking in the exercising ground; and additional indulgence or small rewards are given to all who perform any useful work.

In regard to the establishment at the *Town's Hospital*, I have to report that it is all matters considered, sufficiently adapted for those persons who at present are entertained there. It is undergoing some repairs, and the Directors have it in contemplation to erect an entirely new building. The accommodation here is, no doubt, inferior to that in the Lunatic Asylum, having been erected many years ago, before the improvements which have recently been made upon institutions of this kind were known. It is occupied exclusively by paupers from the city of Glasgow; and as observed, by such as are in a state of hopeless idiocy. It is under the management and controul of an intelligent and respectable Committee, who meet weekly, and superintend every thing connected with it.

Upon the inspection, in the month of October last, I, in conjunction with the medical gentlemen who attended me, suggested to the Managers several improvements, which we thought might be made upon this institution; and, from the inspection which was recently made by my substitute at Glasgow, I am gratified to find, that the greater part of them have been accomplished. In the cells for instance, on the ground floor, several fire-places have been constructed, so that these rooms are now pretty free from every kind of damp; and as many of the patients have been removed to the upper floor, as could be accommodated there, the apartments on which are quite dry. These apartments are now heated by means of stoves, and are, to all appearance, sufficiently comfortable. Some also of the windows have been altered and improved, agreeable to the mode suggested after the inspection last year; but from the style and construction of the building, the very desirable model of those in the Lunatic Asylum could not be adopted. The number of patients in the sick ward is now considerably reduced, and they are properly attended to by a nurse, who has three assistants.

From the dirty habits of many of the patients, loose straw for their bedding is found to be absolutely necessary; but mattresses are allowed to those who are in a different state. The blankets, also, though from the nature of the materials, of a dark colour, appear to be clean and sufficient. All the patients are allowed shoes and stockings, but many of them, from the nature of their disease, and from perverse habit, will not wear them even in cold weather. A warm bath has recently been constructed, to which all those patients, to whom it is recommended by the medical attendants, have easy and ready access. Though the patients are in general considered as out of the reach of being cured, they are nevertheless regularly attended and visited by the medical practitioners at Glasgow, who are in the course of attendance at the hospital.

A material alteration has been made in the diet of the patients, in this establishment. Three days in the week they have butcher's meat and potatoes, which on two of those days is made into soup; upon the other days they have barley broth and butcher meat; and they have oatmeal porridge for breakfast and supper every day. The whole of the improvements suggested upon the occasion, already noticed, would have been carried into effect, but that it is expected that a new hospital will soon be erected on an improved plan. No practices have come to the knowledge of the Directors, which indicate either negligence or inhumanity of the keepers; if any such were to occur, proper measures would immediately be adopted to correct the evil. With the improvements therefore which have been made upon this institution since the former visitation, I have no doubt that it is now upon the whole, reasonably well adapted to the situation of those persons who are entertained in it.

4th.—There is no general provision within my jurisdiction, for the reception of pauper lunatics, except in so far as they are admitted into the two establishments in Glasgow, which have been treated of. As to the support of the pauper lunatics, that, as in the case of other paupers, must fall upon the parish within the county to which by the law of settlement they belong. Pauper lunatics, it will be observed, are received into the new lunatic asylum, upon certain conditions and at certain rates of maintenance, which are specified in the 8th section of the regulations N° 1, herewith sent, to which accordingly reference is made. Paupers again, belonging to the city of Glasgow, have reception in the Town's hospital, and are of course maintained out of the funds of that public institution.

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5th.—As there are no private houses for the reception of the insane, within my jurisdiction, I have not been called upon to make any rules or regulations as authorized by the recent statute. The improvements suggested last year, upon the establishment at the Town's hospital, have, as observed, been almost all faithfully attended to. The new Lunatic Asylum is conducted upon so admirable a plan, that it does not seem to me to require any farther regulations of any kind.

6th.—Before the late enactment upon this subject was made, I conceive that the magistrates in Scotland, and in these of course including sheriffs, had the power, upon an application being made to them, of committing to safe custody a person who was in a state of furiosity, and from whom imminent danger was apprehended to the peaceable part of the community. I give this opinion upon the principle, that it is the duty of the civil magistrate to take measures of prevention against apparent threatenings of danger. I have, however, had no occasion to exercise this power; and if I had found it necessary to commit a furious person, I would have qualified the warrant with a reservation to the friends or relations of the party, to have him liberated, upon their finding security for his being detained and kept by them in such a manner as not to endanger either the lunatic's own life, or the lives of others. In such a case also, my procedure would, in a certain degree, be guided by the examination and certificates, or report of medical men, upon the state and condition of the party. If such a commitment were to be made, the maintenance and aliment of the lunatic, if a pauper, believed to be borne by the parish of his settlement.

Previous even to the recent enactment, I would have considered it my duty as a magistrate, in the event that any complaint was presented to me of the improper detention of a person as in an alleged state of lunacy, by the keepers of a private house, to inspect the said person, and to ascertain, by the inspection and report of medical men, the truth and foundation of the allegation; and then I would either liberate or not, according to the circumstances.

7th. Though I hardly think I am entitled to give an opinion as to what are the powers of the Court of Justiciary in the matter stated in this query, I nevertheless think I may venture to state, that I conceive that Court has no power to commit lunatic convicts but to the recognised public jails, and not to any Madhouse of a public nature.

8th. With regard to the Lunatic Asylum of Glasgow, it has been suggested, and in that I concur, that the enlargement of it in the manner already mentioned, is the only improvement which seems to be necessary; and nothing prevents this but the want of sufficient funds.

The present regulations have been found so well adapted to their purpose, that hitherto no alteration upon them has been found necessary. The principle of continued improvement and progressive amelioration is, however, embodied in the Constitution; and the propriety or necessity of making innovations is annually brought before a Committee for that purpose, and the result of their investigation laid before the General Court of Contributors.

One leading object in this asylum has been, from the first, and still is, to keep the patients clean, comfortable, and under the influence of such motives as seem best fitted for recalling the habits of health, and breaking those morbid associations which often lead to outrage, and always to apathy and listlessness. Besides rewards for useful labours of every kind, inducements are held out to the patients to make them amuse themselves in an innocent manner; and the galleries of the building are lighted up at night, so that those who choose it can walk or divert themselves till the hour of rest arrives. It is owing, it is believed, to these measures, that no suicides have occurred in this institution; and there have been besides, fewer accidents than usually happen where the sitting-rooms are lighted, (as is often the case,) very imperfectly, and the galleries not at all.

In addition to the preceding observations, I have only to remark, that it would, I conceive, be a high improvement upon the general system, in relation to this subject, if public asylums similar to this one in Glasgow were established in different parts, or as connected with certain fixed districts, throughout Scotland. Besides suitable accommodation for those who are enabled to pay for their reception and maintenance, it would in my opinion be highly expedient, and in some degree necessary, to have accommodation for the reception of paupers at the public charge, and for the detention of lunatic convicts, as a part of the public establishment, and under the orders of the Criminal Court and the local ordinary Magistrate. These establishments might moreover be constructed in the vicinity of, though at a proper distance from, the other public institutions for the reception of the insane; an arrangement, which it is supposed, would be productive of economy in the management of them, and tend, at the same time, to insure uniformity in the mode of treating the patients, and of conducting every measure connected with the general system.

All which is humbly reported by,
R. HAMILTON, Sheriff D. of Lanarkshire.

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REGULATIONS of the Glasgow Asylum for Lunatics.

THE Glasgow Asylum for lunatics was built by public contribution. The foundation stone was laid August 2, 1810; and, at the request of the directors, on the 1st of December, 1814, the Asylum was minutely examined by the lord provost, magistrates, and council, who expressed the highest approbation of it, and published in the newspapers a report of its being ready for receiving patients.

From the magistrates and council of the city of Glasgow, the directors have obtained a seal of cause, erecting them into a corporation or political body, with the following constitution, viz.—

The Lord Provost of Glasgow shall be president, *ex officio*; two Directors shall be chosen from the town council; two from the merchants' house; two from the trades' house; two from the physicians and surgeons; two from the general session, consisting of one minister and one elder; eight from the general subscribers; the chief magistrate of Paisley; the professors of anatomy and medicine in the universities of Glasgow, being directors, *ex officio*.

These shall meet once every quarter, on the first Tuesday of the month. From these shall be chosen for the year, a sub-committee, to meet once every week, for attending to the particular interests of the house, admission of patients, and all such business as in the ordinary course of management may arise. This committee shall consist of four directors, the medical gentlemen who attend the asylum, and the treasurer.

A statement of the affairs and management of the asylum shall be laid before a general meeting of subscribers once every year, when eight shall be chosen as Directors. No subscriber below five guineas can be a member of the meeting.

Paupers from the city of Glasgow are to be admitted at a rate annually fixed by a Committee, consisting of two from the directors or the town's hospital, two from the directors of the Asylum, and a magistrate; and the paupers from parishes which have contributed 50 *l.* for every 1,500 of their population, are to be admitted on the same terms as those in Glasgow.

After many deliberations, a plan for conducting the business of the Asylum has been arranged; and, though it be unnecessary to lay every part of it before the public, the following general outline has been printed for the information of those at a distance, and for the satisfaction of all who take an interest in this Asylum.

I.—Of the Physician.

1st.—The physician shall visit the Asylum three times a week, and examine each patient at least once a week. When any one labours under fever or any acute disease, he shall visit that patient every day, or as often as, in similar cases, is usually deemed necessary.

2dly.—After reading the case, he shall carefully examine each patient, and then prescribe the management, regimen, and medicines judged most proper. All this shall be distinctly marked in the case-book, in which, from time to time, regular reports shall be made of the effects of the prescriptions, together with the variations that may occur in the disease or the treatment.

3dly.—On the death or discharge of a patient, he shall add to the case such remarks as may seem proper for explaining and improving the practice; and he shall furnish to dismissed patients such instructions as he may think best adapted for preventing a relapse.

4thly.—Every volume of the cases shall be considered as the property of the Asylum, from whence no volume shall, on any pretence, be carried out.

5thly.—None shall have access to the case-books except the directors, the physician, the apothecary, or such as may obtain, for some specific purpose, a written order from the weekly Committee.

6thly.—No part of such cases shall ever be published, except by the physician who treated the case, or with his consent, if he be living; or in consequence of formal permission from the directors; but no name shall, on any account, or by any person, be improperly disclosed; nor any circumstance mentioned which can hurt the feelings of the friends or relations of any patient.

7thly.—In another book, entitled the Physician's Visiting Book, he shall mark the day and hour of each visit, together with any observation respecting the general management that seems worthy of notice. This book, shall be regularly laid before the weekly Committee, of which he is a member, and whose meetings he shall attend as often as possible.

8thly.—From paupers and from all who pay less than thirteen shillings a week, he shall receive no remuneration whatever, though he must attend these with as much care

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care and assiduity as any others; but from those who pay thirteen shillings a week or more, he shall receive a sum varying from one to four guineas, according to their rate, on the admission of each patient; and if the patient remain more than six months, the same sum is to be repeated on the death or dismissal of each; and if the patient remain more than a year, it is to be repeated once a year.

9thly.—When he may judge it necessary, he may call another physician or surgeon into consultation; and when farther consultation shall be thought necessary by the directors, or the relations of any patient, it shall always be along with him. If the opinion of the physician or surgeon consulted be not adopted, it shall be recorded in the case-book, together with the reasons which prevented it from being acted on.

Lastly.—He is to pay the most unremitting attention to every thing which can increase the comforts or promote the recovery of every patient in the Asylum; nay, he should spare no effort to leave the most ample instruction for his successors, and, if possible, to improve the practice in a disease, in the cure of which very much still remains to be done.

II.—Of the Apothecary and House Surgeon.

1st.—On the admission of each patient, the apothecary shall write down the case in the book already mentioned, marking distinctly every circumstance communicated by the friends, or learned by the most accurate investigation, and repeated conversation with the patient. The case so taken, shall be read to the physician before he examines the patient.

2dly.—In the same book the apothecary shall mark the reports and prescriptions dictated by the physician.

3dly.—He shall carefully prepare, and faithfully administer, or see administered, every medicine ordered by the physician; but, except in cases of sudden emergency, he is himself to prescribe nothing. Wherever such an emergency occurs, it is to be carefully marked in the case-book, together with the prescription to which it gave rise, and the earliest notice of both is to be given to the physician.

4thly.—Under the direction of the physician, he shall perform all the smaller operations. When any difficult operation may be thought necessary, a reputable surgeon shall be employed by the directors, in concurrence with the relations of the patient, to perform it.

5thly.—In a book, kept for the purpose, he shall mark all the medicines which he orders; and in another, all the instruments purchased for the Asylum; noting, from time to time, such as may be injured or worn out, so that a sufficient number, in the best order, may always be kept ready.

6thly.—He shall, on no account or pretext whatever, receive money or presents from patients, or their friends; he shall give no medicine, but to patients or servants in the asylum, nor shall he take charge of any other patients, excepting such as may be accidentally detained in town, immediately after dismissal from the Asylum, or before their expected admission into it.

Lastly.—On discovering any impropriety in the conduct of a patient or an attendant, he shall give immediate information to the physician or weekly Committee, that it may be instantly checked, and in future, if possible, prevented.

III.—Of the Superintendent.

1st.—As his name imports, he is to superintend the whole establishment, regulating the business according to the rules of the institution, in the manner best fitted to ensure the safety, the comforts, and the cure of every patient.

2dly.—Every morning and evening at least, he is to examine the room of each male patient, their galleries, their day-rooms, and their exercising ground.

3dly.—He is, with the utmost vigilance and impartiality, to observe the conduct of all the male servants, to check the slightest appearance of negligence or improper conduct; and with equal promptitude to encourage, and recommend to the directors, those who steadily and faithfully discharge their duty.

4thly.—If any thing should occur so flagitious, that he may judge it necessary to dismiss a servant on the instant, he shall always state to the next meeting of the weekly Committee, the fact, and the grounds on which he acted.

5thly.—He shall make out a list of all the articles belonging to the apartments on the male side, and of the clothes belonging to the male patients, varying it from time to time, according to the articles broken, worn out, destroyed, or added.

6thly.—He shall keep a distinct account of all the provisions ordered and received, and of the money expended by him for the Asylum.

7thly.—In a day-book he shall keep a register of the weather, marking, in separate columns, the height of the barometer and thermometer; the day of the moon; direction of the wind, &c.; by means of which, carefully continued, it may

may be more easy on reading the cases, to determine how far the weather does or does not influence the return of maniacal paroxysms.

In the same book might be noted any remarkable occurrence about the Asylum.

8thly.—During meals he should frequently examine the different rooms, observe the state of the provisions as to cooking, cleanliness, equality of distribution, &c. the conduct of the keepers, and the demeanour of the patients: and every night, before retiring to rest, he should examine the house with the greatest care.

Lastly.—During the day he must never be absent, but on the business of the Asylum; he must always give notice to the matron, or to some other person in the house, of his absence, and of the time of his return, which shall be as early as possible: during the night he shall never be absent, without leave asked and obtained from the weekly Committee.

IV.—Of the Matron.

1st.—The matron is to exercise over the female servants, keepers and patients, a superintendence similar to that of the superintendent over the males; and she is with equal care to examine their apartments, day-rooms and galleries, evening and morning.

2dly.—She is also to superintend the kitchen, the washing-house, and laundry.

3dly.—She is to make out, and keep correct lists of the furniture and clothes of the females, as the superintendent does of the males.

4thly.—Though the apothecary will write the cases of females as well as of males, (but he must always examine the females in presence of the matron or female keeper) and also mark the prescriptions for them; the matron shall keep a day-book, in which she must mark down any important changes that may take place between one visit and another, and suggest any improvements that occur to her.

5thly.—She is to mark in a book, kept for the purpose, all the provisions and necessaries ordered or received by her; as also, all the money expended by her for the Asylum.

Lastly.—She is on no account to receive money or presents from the patients, or any of their friends.

V.—Of the Porter.

1st.—He shall attend the gate according to his instructions, and, when necessarily absent, he shall always commit the care of it to his wife, or to some trusty person, so that it may never be left without an attendant.

2dly.—He shall take charge of the garden, doing every thing in his power to keep it and all the walks in the best possible order.

3dly.—He shall at all times hold himself ready to assist the superintendent, apothecary, and matron, in carrying on the business of the Asylum; and whenever he perceives any thing improper in the conduct of a patient or a servant, he is without delay, to give notice of it to the superintendent.

4thly.—He is to take no money, either from strangers who visit the house, from patients or their friends.

VI.—Male and Female Keepers.

1st.—Every keeper is to observe exactly the rules which will be furnished to each, and when any circumstance may seem to render a deviation necessary, immediate notice of it shall be given to the superintendent.

2dly.—No keeper shall strike any patient, or strive with him, except in self-defence, the possibility of such an occurrence being guarded against by every precaution which prudence or experience can suggest; nor shall a keeper subject any patient to confinement, to privation or punishment of any kind, without express authority, and specific instructions from the physician or superintendent.

3dly.—No keeper shall at any time attempt to deceive or to terrify a patient, nor to irritate the patient by mockery, by mimicry, or by wanton allusions to any thing ludicrous in the present appearance, or ridiculous in the past conduct of the patient.

4thly.—No keeper shall indulge or express vindictive feelings; but, considering the patients as utterly unable to restrain themselves, the keepers must forgive all petulance and sarcasms, and treat with equal tenderness those who give the most, and those who give the least trouble.

5thly.—Each keeper is to exercise the greatest vigilance; and while the patients think themselves at perfect liberty, they are to be continually under the keeper's eye, both in the day-rooms, in the galleries, and in the exercising ground.

6thly.—Whatever peculiarity the keepers may observe in any patient, they are immediately to mention it to the physician or superintendent; and every instance

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of negligence or concealment will be held as a decisive proof of incapacity and unfaithfulness.

7thly.—No keepers shall quit their posts, without special permission from the superintendent or matron, for a limited time. During their absence, which is never to extend beyond the time specified, their place must be supplied by a trustworthy person.

8thly.—In so far as they can, without neglecting the superintendence of their respective patients, all the keepers shall exert themselves to assist the superintendent, apothecary, and matron, in carrying on the business of the Asylum in the best manner, and at the least expense.

Lastly. No keeper is to take money or presents from any person.

VII.—Of Visitors.

1st.—The Asylum shall be regularly visited twice a-week, by a director, or a visitor appointed from among the subscribers.

2dly.—The number of visitors in one year should not exceed twelve, and none should be appointed but those who are willing to undertake the duty, and who pledge themselves to perform it faithfully.

3dly.—The visitors may visit in rotation, for one or two weeks, as may be agreed on. Each shall be regularly warned by the Secretary when his turn comes round; and when he is prevented, he shall request another visitor to supply his place.

4thly.—Their own good sense will prevent the visitors from teasing the patients by idle or improper questions, or by any expression of ridicule or contempt: and it may be necessary to avoid all conversation with those whom the physician desires to be kept in seclusion and darkness: but even these should be examined, so far as to ascertain that they are kept clean, subjected to no needless privation, or improper constraint; and all the rest should occasionally be conversed with.

5thly.—In a book kept for the purpose, the visitors shall mark the day and hour of their visit; the condition in which they find the house, the servants, and the patients, with any thing that occurs to them, as requiring change or improvement. These reports shall be regularly laid before the weekly Committee, and when thought necessary, the committee shall lay them before the General Meeting.

Lastly.—The visitors shall never enter the female wards, but along with the matron, or the female keeper. Each shall pledge his word to repeat nothing out of the Asylum, by which the feelings of the relations, or of the patient, on recovery, could be hurt; and when the physician may judge it conducive to the recovery of any patient, to introduce occasionally a female visitor, it shall be competent for him to do so, with the consent of the relations.

VIII.—Of Patients.

1st.—Patients shall be admitted only on the application of their nearest friends, or their guardians, or the trustees for the poor.

2dly.—The application to the managers may be addressed (post paid) to Dr. CLEGHORN, physician, or Mr. CUTHBERTSON, secretary, in the following form:—

To the Managers of the Lunatic Asylum, Glasgow.

Gentlemen,

Having good cause to believe, as well from our own observation, as also from a certificate from Dr. A. B. physician in C. or of D. E. surgeon in F. in the parish of G. county of H. (herewith sent) that I. K. in the parish of L. has been, for M. time past, unhappily disordered in his or her senses; we beg that he or she may be admitted a patient, according to the regulations of your Asylum.

(Signed)

The Medical Certificate may be in this form:—

I, A. B. physician or surgeon in C. have attended D. in the parish of E. for F. time past; and I do hereby certify, That to the best of my knowledge and belief, he or she is in a state of lunacy, and a proper object for admission into your Asylum. This I certify on soul and conscience—or, if a Quaker, on affirmation.

3dly.—In cases of emergency, the physician may grant immediate admission; in ordinary cases, the application shall be laid before the next meeting of the weekly committee, and an answer returned immediately. If there be any objections to receiving the patient, these shall be explicitly stated by the physician or the secretary; if there be none, the earliest day shall be fixed for receiving the patient, and the friends shall be requested to send as full and distinct an account of the case as possible. To assist them in making out the case, printed queries will be sent, by explicit answers to which, much light will be thrown on the nature of the disorder.

These answers shall be carefully preserved by the physician, and transmitted to his successor, and no name shall ever be published, nor any use made of these letters,

letters, that could hurt the feelings or the interest of any patients, or their relatives.

4thly.—Every patient must bring a proper supply of clean linen, of stockings, shoes, and wearing apparel, with an exact list of every article.

5thly.—Two substantial house-keepers, of whom one shall reside in Glasgow, shall give a bond for the punctual payment of the patient's board, for the supply of such clothes as may be required from time to time, for defraying the expenses of burial in case of death, and for removing the patient when desired by the weekly Committee to do so.

6thly.—Paupers from parishes who have contributed the regulated sum, shall pay per week	-	-	-	-	-	-	-	-	£.	s.	d.
Paupers from parishes who have not so contributed, and the first rate of those not paupers, shall pay per week	-	-	-	-	-	-	-	-	0	8	0
Second rate	-	-	-	-	-	-	-	-	0	13	0
Third ditto	-	-	-	-	-	-	-	-	1	1	0
Fourth ditto	-	-	-	-	-	-	-	-	1	11	6
Fifth ditto	-	-	-	-	-	-	-	-	2	2	0
Sixth ditto	-	-	-	-	-	-	-	-	3	3	0

The payments to be made quarterly, and always in advance.

When a patient shall either die, or be dismissed cured, very soon after a quarter is paid for, an appeal shall be made to the weekly committee whether any and what part shall be refunded.

7thly.—The accommodation must be varied according to the rate of board, and the diet according to that, and the state of the disease; but the general management of the house will be conducted according to the following plan:—

From the 30th of March to the 30th of September, the servants shall rise at six, and from the 1st of October to the 31st of March, at seven each morning.

Patients able to leave their beds, are to rise an hour after the servants.

The patients are to breakfast at half-past eight in summer, and at nine in winter. Paupers are to dine at half-past one, and the others at half-past two each day.

At six, those to whom it is allowed, are to get tea, or coffee, or cocoa; the paupers bread, with beer or milk.

At eight, supper is to be served; and at half-past eight in winter, and nine in summer, all are to retire to rest.

Paupers are to have for breakfast, porridge with beer or milk; for dinner broth with plenty of vegetables, or potatoe soup, or peas soup, with an allowance of butcher's meat four times a-week, from six to fourteen ounces, two middling-sized potatoes, and a small loaf. On the other three days, they are to have butter or cheese, with a double allowance of bread.

For supper, they are to have bread, or porridge and milk, or bread and beer, with a little butter or cheese.

The patients, not paupers, are to have good broth or soup every day, with a plain joint boiled or roasted, with puddings occasionally, and vegetables, according to the season. Each is to be allowed an English pint or a bottle of good small beer.

To have tea or coffee, or cocoa twice a-day.

To have for supper, porridge and milk, or potatoes and bread, with milk or beer. None to get porter, strong ale, wine or spirits, except those for whom they are particularly ordered.

Each male pauper is to be shaved every third day, when it is practicable; the others every second day, and all are to be regularly washed every day, besides occasional bathing.

The feet are to be carefully examined every day, especially during winter.

The linen and stockings are to be changed every third day at farthest.

Those accustomed to flannel shirts are to have them changed once a week at least.

Those accustomed to snuff or tobacco, to be allowed a proper quantity.

All will be encouraged to employ themselves in useful occupations, in innocent amusements, and, above all, in taking regular exercise in their galleries, and whenever the weather permits, in the open air. For this purpose each ward has access, by a separate stair, to its own airing-ground; where a dry extensive walk can be enjoyed without the chance of escaping, though they seem at liberty, and without the possibility of meeting any but their own associates.

8thly.—If at any time the house should be full, those who apply for admission shall be admitted in the order of their applications (though in this, the weekly Committee are to have a discretionary power of controul,) of which the dates shall be regularly marked in a book kept for that purpose by the secretary.

9thly.—At the end of every quarter, there shall be laid before the Directors a list of such patients as the physician may judge unfit for residing longer in the Asylum. If his reasons be approved of, the Directors shall order the removal of such patients within a time, varying according to the distance whence they came. If the patient be not removed within the time specified (unless in peculiar cases,

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of which the weekly Committee shall judge,) the board shall be doubled for every week elapsing after the time fixed in the notice; which notice shall always be sent by the secretary, in writing, to the house-keeper in Glasgow, who is bound for the board.

10thly.—No idiot, unless mischievous, shall be admitted; and when any one already in the Asylum falls into idiotcy, that patient shall be dismissed as speedily as possible.

11thly.—Those affected with epilepsy or other forms of the disease, generally found incapable of cure or even of mitigation, after a trial of *one year*, shall be dismissed whenever there are applicants under more cureable forms of the disease. If this were not done, the house would soon be filled with incurables, whence its utility would be much impaired.

12thly.—Near relations or friends shall, by an order from the physician, be allowed to visit patients from twelve till two. The order will be printed, with proper directions, calculated to prevent the visitors from hurting the patients, or from harbouring suspicions of improper concealment.

13thly.—No male visitor shall be admitted into any female ward or apartment, except the father, brother, or husband of the patient, or if the patient come from a distance, some person authorized by a letter from one of these; but except a father or brother, no man is ever to be left with any female patient, without the matron or keeper being present; and no female is to be admitted into the male wards or apartments but under corresponding restrictions.

The matron or keeper is also to accompany the physician and apothecary, during their visit to the females.

14thly.—No person is to bring into, or carry out of the house, any article, without the knowledge of the superintendent, or matron, or keepers.

15thly.—Those admitted to see the Asylum or the grounds, shall write their names in a register: none of them shall hold conversation with such of the patients as may come in their way; and if any improper freedom shall ever be attempted, the name of the offender shall be noted, and all access to the house denied to that person for the future.

Lastly.—As it is of great importance speedily to remove any improper regulations, to supply deficiencies, and to correct errors, which experience may point out, a Committee of Directors shall be appointed every year in the beginning of October, for the express purpose of revising all the regulations, and suggesting such improvements, additions or alterations, as they may think necessary: but, as it is of equal importance to make no improper change or needless innovation, no change shall be made on the regulations till it has been submitted to the consideration of the Directors for one month at least; and it shall not be adopted unless approved by two thirds of the Directors warned to meet for the express purpose of voting on it.

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QUERIES.

YOU are requested to send precise answers to the following queries; and, if there be any important information which does not seem to fall under these answers, you are earnestly requested to add it in the manner which you think best.

1st. What is the age, and what was the employment of the patient?

2d. Before requiring confinement was there any thing odd, whimsical, flighty, or in any respect peculiar in the conversation, the deportment, or the pursuits of the patient? If so, specify it.

3d. At what time did the insanity rise to its present height, and from what cause? Be particular in specifying what is known or supposed on this head.

4th. Did any of the relations ever labour under a similar malady? Or was any thing remarked as very peculiar in the manner, the appearance, or conduct of any of them, so far as you know?

5th. Was the patient of a violent or quiet temper formerly?

6th. Since the attack, has he made any attempt to hurt himself or others?

7th. Is he prone to tear his clothes, or to destroy any thing within his reach?

8th. Is the raving confined to one subject, or does it consist in forming wrong judgments on every subject equally?

9th. Are there lucid intervals? If so, are they complete? How often do they occur, and how long do they continue?

10th. Has

10th. Has any thing been done for his recovery? What has been done, and with what effect?

11th. Has the patient been in any public asylum or private hospital? How long did he remain there? When, and for what, was he dismissed?

12th. Has the patient any other disease? Any sores, eruptions, rupture, epilepsy or palsy?

N. B.—According to the regulations of the Asylum, a letter of obligation from a responsible person in Glasgow, for the regular payment of the patient's board, and for the observance, in every respect, of the rules of the institution, must be given, before any patient can be admitted.

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Appendix (D.)

ANSWERS by the SHERIFF DEPUTE of Aberdeenshire, to the
QUERIES transmitted by Order of the Committee of the Hon^{ble}
House of Commons on Madhouses—29 March 1816.

To Qu. 1.—THERE are, within the bounds of the jurisdiction, only two institutions for the reception of insane persons; both situated in the immediate vicinity of the town of Aberdeen. The most considerable of these is called The Aberdeen Lunatic Hospital or Lunatic Asylum, and is connected and under the same management with the Infirmary of Aberdeen, an establishment for the reception and cure of the indigent sick, incorporated by royal charter in 1773.

This Infirmary was begun to be erected about the year 1739, and was built and has been almost wholly supported by voluntary contributions, donations and legacies. Soon after its institution, the Magistrates and Town Council of Aberdeen applied to its use a small Fund under their management, called the *Bedlam Fund*, for the purpose of maintaining one or more lunatic patients. Some additions having been made at a subsequent period to this Fund, a small building was erected attached to the Infirmary, containing six cells for lunatics, to be placed there by the magistrates; and *these*, until the year 1800, were the sole receptacles of a public nature in this extensive county, for insane persons of all descriptions. In that year the trustees of a gentleman, who left some money at their disposal for charitable purposes, assigned a considerable part of it to the managers of the Infirmary, for the erection of a separate lunatic hospital under their charge, in which, in addition to the six patients in the Infirmary, five more were to be recommended by the magistrates of Aberdeen, and maintained free of all expense. Further aid having been obtained by donations, subscriptions and collections at churches, ground was purchased about half a mile distance from the Infirmary, and a house built capable of containing about 50 patients. This house, although specifically constructed for the purpose, is by no means well contrived, but the areas attached to it are sufficiently extensive and well aired.

The other place for the reception of insane persons, called The Spital Asylum, being situated in a village of that name, was opened in the year 1808 by a person who had been keeper of the other hospital, under the superintendence of the senior minister of the parish, and several other respectable gentlemen. The premises applied for the purpose consist of several small adjoining houses belonging to the keeper, containing several small apartments sufficient for 10 or 12 patients, but the accommodations are in general mean, and fitted only for those of the lowest rank, by whom they are in general occupied. The situation is however well aired; and there is attached to it a neat but small garden for the use of the male patients, and another area (rather confined) for that of the females.

Lists of the persons confined in each of these houses are herewith transmitted, certified by the clerk or keepers respectively, stating the ages, stations, and also the sums paid for the board of each patient.

To 2d Query.—I have visited both these institutions, under authority of the Act of last Session; I gave no previous notice of my intention, but notwithstanding found both houses perfectly clean and in good order.

To 3d Query.—It will be most convenient to apply the Answers to this Query to each house separately.

I. ABERDEEN LUNATIC HOSPITAL.

THE management of this institution, and the treatment of the patients, seem entitled to great praise. At present the house is visited by a physician daily, and as often as circumstances may require, also by the two other physicians who attend the Infirmary; and all the three physicians, with the house-surgeon of the

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Infirmery, accompanied by one or more of the medical gentlemen who are managers, examine all the patients monthly. A regular case-book is kept, which is laid before a Committee of the Managers, who meet and inspect the house weekly.

It appears from the reports made annually by a Committee of the Managers, of which copies (N^o 4 and 5) are transmitted, as well as from other information communicated to me, that the disease of insanity has been of late, in this hospital, treated as one which may be cured by medicine; and that medical treatment has accordingly been afforded in all those cases (which however are but few) in which it was thought it could be applied with any chance of success.

The keeper and servants appear to treat the patients with great attention and humanity; and to the keeper's wife in particular, who accompanied me when I last inspected this house, many of the patients expressed very warm attachment. Both the present keeper and his wife, before they entered upon their charge, were, at the expense of the hospital, sent to York, where they were allowed to see the treatment of the patients and management of the Quaker Asylum there, called The Retreat; and they have made good use, as I am assured, of the instruction they have received.

It has been found but rarely necessary to use coercion to any of the patients; when it is required, a broad belt round the wrist, and including the hands, is generally preferred to the strait-waistcoat, as giving more play to the lungs. When I last visited the house, I observed one patient sitting by the fire shivering, and this, I was informed, was occasioned by his having been subjected that morning to more than his usual period of a shower-bath, applied, as I then understood, as a punishment for some irregularity; a proceeding which seemed reprehensible. But it is now stated, that this patient was subject to a chronic mania, at particular periods of which the application of the shower-bath is found very beneficial; and that the orders, to which there is reason to suppose due obedience is given, are positive, that no punishment shall on any account be inflicted.

The house, as already mentioned, is by no means well constructed; the lower part is principally laid out in cells or small sleeping apartments for the poorer classes and for the most unmanageable of the patients, and these having no fire-places, were, till three years ago, damp and cold; but at that period steam pipes were introduced, and by these the cells and the rest of the house are now rendered warm and comfortable. The apartments are all kept very clean.

The two sexes of patients are kept entirely separate; there are separate public rooms and airing-grounds for each. There is likewise a separate public room for the higher and the lower rank of male patients; that accommodation is still wanting for the female: And there are as yet no means of separating the patients of either sex who are incurable from those who are curable; an improvement of great importance, which the Managers are disposed to make as soon as their funds will admit.

II. SPITAL ASYLUM.

TWO physicians give their attendance on this house gratuitously, but their visits are not so frequent as those of the physicians attending the hospital. From a book, in which the visits both of the physicians and of the patrons of the asylum are entered, it appears, that the visits of one of the physicians are not more frequent than once in eight or ten days, and those of the other than once in three or four weeks. No case-book is kept; nor does the disease of insanity, as it affects the individuals confined in this house, appear to have been considered as a fit subject of medical treatment, as contrasted with management. In justification of these physicians, they have stated, and I presume truly, that the persons under confinement being chiefly those afflicted with melancholy of long standing, or idiots, can receive no benefit from medicine; and they farther state their opinion to be, that in most cases moral treatment or management is of great importance, while in very few is medicine of much use. These gentlemen, as well as the patrons of the institution, describe the management of the keeper and his assistants as humane, judicious, and successful. Coercion is but seldom necessary, and when it is, the belt is, as in the other hospital, preferred to the strait-waistcoat. The keeper acknowledged that he had in some instances used the shower-bath as a punishment, by keeping a refractory patient longer under it than he otherwise would have done; and also that he had, at least in one instance, flogged one of the patients with a small leather thong, to deter him from a repetition of some irregularity. I have thought it my duty to disapprove of this conduct, to insist that the practice shall be immediately relinquished; and to enjoin, in particular, that the bath shall be administered only to the extent and at the times prescribed by the physicians. It is fair to add, that these punishments do not appear to have been inflicted from wilful cruelty.

This Asylum, which consists of two or three small houses adjoined to each other, is capable of containing only twelve patients. There is a small public or day-room for those of each sex, and two or three of the bed-chambers are sufficiently comfortable; but the rest are small and confined, two of them being little closets off the day-room. The day-room and best sleeping-rooms are heated by common fire-

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fire-places. The others have no fire at all, and must in winter be very cold. The women's day-room and their airing-ground are both very confined. The whole however are kept very clean; and as the patients confined in this house are of the lowest rank, being chiefly paupers maintained by parochial or private charity, they are probably, upon the whole, more comfortable than they could have been in their own houses.

To Qu. 4.—I know of no other provision for the reception, maintenance, and treatment of pauper lunatics within this jurisdiction, than what is above mentioned. The eleven paupers maintained free of expense in the Hospital, are all appointed by the Magistrates of Aberdeen, and are exclusively natives, inhabitants of or connected with the town of Aberdeen. The sums for board paid for the other paupers in both houses, are made up by aid from the poor's funds of the parishes from which they come, and by contributions from their relations or charitable individuals.

It appears by the Report of the Managers of the Hospital for the last year, that they consider that institution as intended only for the reception of such lunatics as are dangerous or curable; and if the future admissions into that house be regulated accordingly, a large class of these unfortunate persons will remain a burden on their friends, and become, if not dangerous, troublesome to the public.

To Qu. 5.—I have not found it necessary to add to the rules already adopted for the management of the lunatics in either of the houses above described, farther than to recommend a strict obedience, by the keepers, to the order against inflicting punishment on the patients, or using the shower or other bath, unless with the acquiescence of the physicians. Some suggestions as to better airing of the apartments have been made, and I doubt not will be attended to. A copy of the original rules of each house, and of the additional regulations in the Hospital, are herewith transmitted.

To Qu. 6.—I am not acquainted with any legislative enactment, previous to the passing of the late Act, giving power to the Magistrates in Scotland relative to the confinement of lunatics and inspection of Madhouses; but there can be no doubt, that in case of information or well-founded suspicion of oppression, cruelty, or unnecessary severity, either by the keepers of Madhouses or others, the Magistrate would have thought himself entitled and bound to interfere, and to redress and punish where necessary.

To Qu. 7.—The court of Justiciary have of late years been in the practice of ordering lunatic convicts to be confined for life. Sometimes the order has been given to confine them in jail, until such time as the relations should become bound with sufficient sureties for their confinement elsewhere; and in other instances, the order has been for confinement in a public hospital or asylum. This at least was the case at the last autumn assizes at Aberdeen, when a lunatic received sentence of confinement for life in the public lunatic hospital. The managers at first seemed disposed to resist the order, but afterwards complied, on being assured of payment of the usual allowance for maintenance; and the person is now one of those in the list transmitted.

To Qu. 8.—The Act of last Session, by which powers and directions are given to the sheriffs to inspect and regulate Madhouses in Scotland, seems in general well adapted to its object, and has given satisfaction to the country. It would have been desirable that the statute had defined more precisely what was to be considered a public hospital, and what a private madhouse.

The house here entitled, The Spital Asylum, appeared to me rather to fall under the latter description; but the contrary was urged strongly by the respectable gentlemen who are managers, and who as well as the physicians had given their services gratuitously, considering it as such; and the circumstance that most part of the persons confined are paupers, maintained by parochial or other charity, who must, if the license duty was demanded, be discharged and thrown loose on the public, has induced me, after stating the case to the Lord Advocate, to suspend hitherto the levying the duty for these persons; the keeper complying with the other requisites of the Act, and reporting to me the case of every patient admitted, with the medical certificate authorizing the admission.

I must, indeed, humbly suggest to the consideration of the Committee, whether the funds necessary for carrying the Act into execution, might not be raised more equitably than by the license duties, which if applied to patients such as now described, of the lower ranks, prove a severe tax on the small property of these unhappy persons, or of their relations, or of the parochial poor's funds.

The expense of inspection and regulation under the Act, cannot be so great as to render it a heavy burden on the Rogue money of the country, without any other equivalent than the penalties incurred by persons found guilty of improper practices, which might, as directed by the Act, be with great propriety continued to be paid into that fund.

Aberdeen, 6 May 1816.

ALEX. MOIR,
Sheriff Dep. of Aberdeenshire.

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(D.)

Answers by the
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Appendix (D. No. 1.)

LIST of PATIENTS in the Lunatic Asylum, Aberdeen, 4th April 1816.

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(D. N^o 1.)Answers by the
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Aberdeenshire.

No.	DATE OF ADMISSION.	Age, Years.	ANNUAL PAYMENTS for Board and Keeping, exclusive of Cloths and Bedding.		
1.	8 November - 1800	60	These eleven are Paupers, admitted on charity funds, under patronage of and re- commended by the Magistrates of Aber- deen.		
2.	9 December - —	35			
3.	13 February - 1807	34			
4.	9 November - 1800	40			
5.	1 February - 1808	51			
6.	17 June - - - 1809	52			
7.	22 May - - - 1810	26			
8.	5 October - - 1811	24			
9.	27 November - 1812	23			
10.	15 January - 1813	23			
11.	7 October - - —	35	£.	s.	d.
12.	26 June - - - 1803	38	30	—	—
13.	6 July - - - 1804	50	15	—	—
14.	30 August - - —	49	25	—	—
15.	2 July - - - 1805	60	15	—	—
16.	22 — - - - —	39	15	—	—
17.	15 December - 1807	35	15	—	—
18.	20 January - 1808	55	15	—	—
19.	20 July - - - —	45	25	—	—
20.	20 December - —	43	15	—	—
21.	28 March - - 1811	43	30	—	—
22.	23 March - - 1812	87	15	—	—
23.	14 July - - - —	60	15	—	—
24.	22 — - - - —	56	20	—	—
25.	23 October - - —	53	30	—	—
26.	— - - - - —	47	30	—	—
27.	27 March - - 1813	27	15	—	—
28.	28 July - - - —	45	25	—	—
29.	24 August - - —	45	15	—	—
30.	24 June - - - 1814	46	15	—	—
31.	21 July - - - —	52	15	—	—
32.	22 — - - - —	43	10	—	—
33.	27 — - - - —	16	15	—	—
34.	6 September - —	42	20	—	—
35.	8 October - - —	26	25	—	—
36.	4 January - 1815	30	25	—	—
37.	17 — - - - —	54	15	—	—
38.	19 — - - - —	38	15	—	—
39.	7 May - - - —	55	25	—	—
40.	19 — - - - —	53	15	—	—
41.	16 June - - - —	60	15	—	—
42.	12 August - - —	22	20	—	—
43.	4 September - —	58	15	—	—
44.	26 — - - - —	23	15	—	—
45.	22 October - —	42	15	—	—
46.	2 November - —	66	15	—	—
47.	28 — - - - —	40	35	—	—
48.	8 December - —	28	15	—	—
49.	8 January - 1816	36	15	—	—
50.	26 — - - - —	39	15	—	—
51.	1 February - —	58	15	—	—
52.	20 — - - - —	40	40	—	—
53.	— - - - - —	33	10	—	—
54.	12 March - - —	22	20	—	—

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Appendix (D. No. 2.)

Appendix
(D. N^o 2.)Answers by the
Sheriff Depute of
Aberdeenshire.

LIST of PATIENTS in the Spital Lunatic Asylum, 6th April 1816.

No.	DATE of ADMISSION.	Years of Age.	Rate of Board Paid.
1.	1 May - - 1813 -	46	£. 20 per annum.
2.	2 May - - 1814 -	37	£. 25 per annum.
3.	7 May - - 1814 -	34	6s. per week.
4.	8 July - - 1814 -	38	6s. per week.
5.	22 September - 1814 -	38	£. 20 per annum.
6.	11 January - 1815 -	52	£. 15 per annum.
7.	11 July - - 1815 -	57	£. 20 per annum.
8.	8 March - - 1816 -	36	£. 15 per annum.
9.	26 March - - 1816 -	47	£. 15 per annum.
10.	28 March - - 1816 -	39	£. 26 per annum.

Appendix (D. N^o 3.)

LUNATIC ASYLUM.

WITH regard to this establishment, the Report comprizes twelve months, and the alterations made in the medical department and economy of the house are still greater than those that have taken place in the infirmary. Since the 1st of January 1814, the cases have been regularly entered in a case-book, and, with the exception of such patients as have been, after full examination, deemed incurable, are continued; stating the mode of cure adopted, the effect of the medicines prescribed, and the event, whether successful or otherwise. Of the patients in the house on the 1st of January 1814, amounting to 42, the greater number were without hope of cure, being born idiots; or the insanity of so long standing, and the constitution so much impaired, that it was not thought advisable to put them upon any course of medicines.

Of the patients admitted since the 1st of January 1814, 18 in number, 7 have been dismissed perfectly cured; 4 have been dismissed at their friends desire, much improved in health and with good hopes of complete recovery; and 7 remain under cure. In the course of the year, a method of cure has been adopted, which, in former times, was celebrated as most successful, and, in as far as experiments have cautiously been made, promises to be efficacious now in many cases, and that is, the internal use of Hellebore. A particular account is kept of the cases in which it has been used, with the effects, which it is intended shall be continued, with a view to publication at a future period.

Within the year four patients have died; one from organic disease of the brain; one from suppuration in the perinæum; and two from a gradual exhaustion of strength: these were of the number of patients remaining in the house on the 1st January 1814. It is also to be observed, that even since that period several patients have been admitted, who were neither objects of medical treatment, nor dangerous to society; and of this description are more than two-thirds of the patients now in the house, amounting to 45.

The house being visited the 1st Tuesday of every month by the physicians of the infirmary, attended by such of the medical managers as can attend, these managers have it in their power to say, from personal knowledge, that the treatment of the patients by Dr. Williamson, has been judicious and successful; and his attention to every one under his care, assiduous.

With regard to the internal economy of the house, many improvements have taken place. A complete separation between the male and female patients has been made, by a division wall between their airing grounds, and the construction of a new hall for the women; the grounds are sub-divided by gravel walks and planted; and all the cells are now heated by steam, so that the patients can suffer no injury from even the most intense colds; the temperature of the cells being kept

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(D. N° 3.)Answers by the
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up to about 56° of Fahrenheit's thermometer during the winter nights. For this improvement, now fully completed, the institution is under great obligations to Mr. Thomas Kilgour, one of the managers, who took the sole charge of conducting the business, and attended almost daily to its progress; and although it adds considerably to the expense of the house, must yet be considered as an object of the very first consequence, both with regard to the health and comfort of the patients.

During the year, very little coercion has been found necessary, even the strait-waistcoat being seldom used; and, at some of their visits, the managers have found all the patients dining quietly together, with the exception of one or two, confined to their cells by incurable lameness. Much of this good order must be attributed to the excellent management of Mr. and Mrs. Anderson, who, by the indulgence of the Society of Friends, were admitted to see the treatment of patients and internal management of their *Retreat*, near York, before they took charge of the Aberdeen Asylum, and whose plans they have successfully followed. It were, however, unjust to Mrs. Anderson, not to notice particularly the admirable cleanliness and good order of the house, points in which, it is not too much to say, that it is not excelled by any establishment in the island.

The general state of the finances of the Asylum have hitherto been made up in May, but it is intended to have the accounts of both establishments balanced at the same time, for publication.

It only remains to add, that the keepers and assistants (a female being found sufficient to attend the women) treat the patients with much humanity, and are strictly attentive to their several duties.

(Signed)

CHARLES SKENE, M. D.

Chairman of the Medical Committee.

JAMES ROSS, D. D.

Chairman of the Committee of Economy and Finance.

Appendix (D. N° 4.)

LUNATIC ASYLUM.

WHEN the Report of last year was published, the Managers had in view to attend more closely to the Cure of Insanity, with the intention of adopting some of those methods of cure which, in former times, proved so eminently successful; but it is a fact, that of fifty-three patients now in the house, more than forty are altogether incurable, so that medical treatment is out of the question. Of these many are harmless idiots, who never ought to have been admitted; for the Establishment was certainly intended for the reception of insane persons dangerous to society, and such recent cases as may still appear curable. For the most part, there is little chance of success if the disease has continued more than three years; and in Bethlehem Hospital of London, and Swift's of Dublin, medical treatment is entirely discontinued, if not successful within one year.

With a view, therefore, to ascertain the proper objects of admission, to facilitate the arrangement of cases, and assist the physicians in determining on the proper mode of treatment for each patient, the Managers are of opinion, that it will be of much advantage to have a short account of the patient's case transmitted, with the application for admission: and this may be drawn up by the medical practitioner who may have attended, the clergyman of the parish, or any intelligent person, who can ascertain the facts, and return answers to the following questions:

1. What is the age of the patient—married or single—of what station in life, or what employment?
2. Is there any reason to believe the disease hereditary?
3. Of what natural disposition is the patient—cheerful or melancholy? has any peculiarity been observed in manners, or any thing remarkable in the constitution?
4. How long has the patient laboured under derangement? and is the malady attributable to any known cause, as religious melancholy—disappointment in love—misfortunes in life? Whether, in women, it has come on after in-lying; or whether, in either sex, it appears to be the consequence of injury done the head—the exhibition of any powerful medicine—Fever, or any other physical cause?
5. Is there any particular subject which irritates the mind of the patient, or produces a train of thinking more than usually incorrect?

6. Is the patient at any time dangerous—attempting suicide—or to destroy others?

7. Have remedies been tried—how long—and with what effect?

In cases of sudden attack, it may be necessary to admit a patient, without insisting upon the usual forms; but, unless in cases of obvious and urgent necessity, answers to the above questions must accompany every application for admission, and be sent in within fourteen days after a patient has been admitted without such information.

Much has been done of late to improve the Asylum, but a most important improvement is still wanted; and that is, the means of entirely separating the incurable from the curable: for nothing hurts the feelings of convalescents more than the sight of incurables, and the idea that they must, in so far, associate with them. The kind attention of Mr. and Mrs. Anderson in so far relieves the convalescent from this distressing association, but, without a complete division of halls, apartments, cells and airing-grounds, it cannot be entirely obviated. Such a division ought to be made both of male and female patients; and the women's airing-ground, as being confined, and not nearly so well aired as the men's, ought to be enlarged, and new modelled; but the state of the finances of the Establishment shews, that at present, there are not sufficient funds for carrying these Improvements into execution.

From January 1st, 1815, to January 1st, 1816,

There have been admitted——Men 12—Women 10——22

Recovered	-	-	-	-	-	7
Much improved	-	-	-	-	-	1
Removed by friends	-	-	-	-	-	1
Dead	-	-	-	-	-	1
Remain in the House	-	-	-	-	12	22

Of the Incurables previously in the house, five died within the year: one in the most helpless state of decrepitude and debility; one fell down apoplectic, and died; and three gradually lost appetite and strength.

The interior economy of the house continues to deserve the unqualified approbation of the Managers. At whatever time the Medical Committee, or any of their number, have visited, they have found the house clean, and the best order maintained in every department; the keeper, matron, and servants, being strictly attentive to their respective duties.

(Signed)

JAMES ROSS, D. D.

CHARLES SKENE, M. D.

Appendix (E.)

REPORT of the Sheriff of the County of Renfrew, respecting Madhouses and Insane Persons.

To Query 1.—IN the county of Renfrew there is only one house which comes under the description of an institution for the reception of insane persons. This institution is established at Paisley, and forms only an appendage of the town's hospital or poors house, which was erected in 1752, for poor persons who were unable to support themselves, from age or bodily indisposition. After this institution was established, idiots or persons weak in mind were received; but the population, and in consequence the poor of the town having increased, and some cases of insanity having occurred, the establishment was in 1768 increased by the erection of a smaller building, as an appendage for the reception of persons afflicted with mental indisposition. This appendage consists of four small cells or apartments on the ground floor, for persons in a state of considerable derangement, and three rooms on the second floor, for persons of the same description who are more tractable. Idiots or persons of weak mind were received as before, in some of the apartments of the old building, with the privilege of walking in a court connected with the establishment.

In no other part of the county has there existed before, or does there now exist, any establishment for insane persons; although persons of that description have been occasionally confined in the prison or bridewell of the town of Greenock.

Query 2.—In the month of April last I visited the institution at Paisley, under the authority of the Act of Parliament.

Query

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Query 3.—From the enquiries which I made at this institution, I have reason to believe that sufficient attention is paid to the patients, so far as respects their food, their beds, and the keeping of their persons clean. The medical person who is employed in the hospital attends the lunatics when they are afflicted with bodily indisposition; but no other remedy appears to be applied to their mental malady, except coercion by a strait jacket. They are generally confined to their apartments or cells, which are very small and ill-lighted. The keeper of the hospital, however, who has been twenty-five years in the situation, reports to me, that he has known various insane persons discharged in a sound, or at least in an improved state.

Query 4.—There are a number of insane persons in the county of Renfrew, who are taken charge of by their relations in their own houses. When their relations are unable to support them, themselves, an allowance is made from the parochial poor funds in the same manner as to other paupers. Some of the parishes in the county, however, have subscribed to the Lunatic Asylum at Glasgow; and in consequence of this subscription, a right is obtained to such parishes to place insane persons in the Asylum at Glasgow, at a board cheaper than the ordinary rates.

Query 5.—I have made no regulation for the management of the lunatics in the Institution at Paisley, because sufficient attention appears to be paid to the bodily health of the patients, or at least as much attention is paid as the nature of the establishment will admit of; and as to their mental maladies, the Institution is of so imperfect a nature, as to be incapable of receiving any improvement from any regulations which I could lay down.

Query 6.—Previous to the passing of the Act alluded to, the Sheriffs, Magistrates, and Justices of Peace, were understood to have sufficient powers at common law for the confinement of lunatics by whom any mischief had been committed; and these powers have been frequently exercised.

Query 7.—The Court of Justiciary is understood to have ample powers with respect to the commitment of lunatic convicts, either to madhouses of a public nature, or to private places of safety.

Query 8.—The establishment, or the improvement of madhouses in Scotland, appears to me to be an object well deserving of the attention of the Legislature. With respect to those which are already in existence, I can say but little (with the exception of what I have stated as to the Institution at Paisley,) but I have frequently heard, that those established at Edinburgh and at Glasgow, are under a very good system of management. They are defective, however, in two important particulars; the one is, that lunatics who prove to be incurable are discharged; and the other is, that idiots, or persons weak in judgment, are not received. To accomplish the objects which are in view by the establishment of lunatic asylums, it seems to be essential that there should be attached a proper number of medical and other persons, who are skilled in the treatment of such maladies; and each house of this description can of consequence be only supported at a great expense. It will probably therefore be found difficult, if not impracticable, to maintain a lunatic asylum in each county in Scotland; and it seems to be on the whole more expedient, that Scotland should be divided into districts, and one institution of this kind be established for each district; but a plan, even on this limited scale, will not be easily accomplished without pecuniary assistance from Government. The asylum at Glasgow might be so enlarged, as to serve for the western counties, viz. Lanark, Renfrew, Ayr, Dumbarton, Stirling, and Argyle; and the managers, I believe, are very much inclined to adopt those measures which might effect this enlargement; and in particular to extend it so, as that incurables may be retained, and idiots (I believe) be received. Whether pecuniary aid from Government will be necessary for the additional grounds or buildings, is a question which the managers are best able to answer. It is a matter too deserving of attention, in what way the board of each patient is to be defrayed. Where the patients belong to the better ranks of life, the expenses are generally defrayed by their relations; but where the patients belong to the lower class, as is most commonly the case, the expense, varying from nine to fifteen shillings per week, generally falls on the poor's funds of the parish from where the pauper comes; and as these funds are seldom able to bear such burdens, this discourages the overseers of the poor from availing themselves of a lunatic asylum in many cases. It would perhaps therefore be advisable, that the counties of each district should be subject to an annual assessment, either for the general support of the patients, or varying according to the number of patients which are sent from each of the counties respectively.

Follows a list of the insane persons at present in the hospital at Paisley, as given to me by the keeper.

1. William Davidson, aged 38, admitted 29th July 1809. He is a native of Paisley, and was some years in the artillery service, when he became deranged; and after means were tried in the regiment for his recovery, but without effect, he was sent home to the care of his relations. He has now obtained his discharge, and there is an allowance granted by the regiment for his board, which is paid to the

the hospital. He is now better than when admitted, but there is a little prospect of his complete recovery. He has been confined ever since his admission to a cell on the ground floor.

2. Robert Reid, a pauper belonging to the Abbey parish, aged about 30, admitted 20th September 1815. This person, since the time of his admission, has been very troublesome, sometimes outrageous; but his case has been so variable, that during lucid intervals strong hopes have been entertained of his recovery. At his first coming to the house, he was confined to a cell on the ground floor, where he remained for a few weeks, but has since been confined to a room up stairs. He is particularly troublesome, from his obstinacy in persisting in a want of cleanliness. There are steps at present taking by the overseers of the poor of Abbey parish, for his removal as soon as possible to the Lunatic Asylum, Glasgow.

3. Elizabeth Nicol, aged 47, admitted 3d October 1804. Before her admission she had become quite violent in assaulting people in the streets, in consequence of which the magistrates requested the Directors to admit her to the hospital, and keep her in close confinement. She is confined to a cell on the ground floor; but as she is now in a calmer state than formerly, she is occasionally allowed to go at large through the house in the daytime; but this can seldom be permitted to her, because that whenever she mixes with the people in the house, she becomes irritable, and so violent, as to be dangerous to those around her.

4. Elizabeth Beith (alias Mrs. Meikle) aged 46, admitted 22d May 1810. She has been confined to a room up stairs ever since the time of her admission, and from particular circumstances in her case, requires a great deal of attention from those who have the charge of her. Before she came to the house, she had for a number of years been in a very melancholy state of mental derangement, and at last became so unmanageable, that her relations, who were poor, were obliged to part with her. There does not seem the least prospect of her recovery.

5. Lillias Fleming, aged 22, admitted 27th March 1816. This person is confined to a cell on the ground-floor, and is in a very bad state. The medical gentleman who attended her case in order to her admission, thus expresses himself: "Lillias Fleming, in Moss-street, has been deranged for more than a year and a half, and is liable to such outrages, as to be dangerous to her mother and sister, with whom she resides, and troublesome to the neighbours."

I subjoin a list of insane persons who are confined in the houses of their relations, or have been sent out of the county. This list, however, only comprehends the lower ward of Renfrewshire, which includes the parishes of Greenock, Port Glasgow, and Innerkip. I have not yet received any list of the persons in that situation in the upper ward, which comprehends about two-thirds of the population of the county.

GREENOCK; West, or old Parish.

1. James Watson, aged 48, insane, resident with his mother here, and receives 7*l.* 10*s.* yearly from the Poor Funds.
2. James Stewart, partially insane, resident with his wife here, and receives 3*l.* 12*s.* yearly from the Poor Funds.
3. John McMillan, aged 38, insane, about to be sent to Glasgow Asylum.
4. Elizabeth McArthur, aged 26, insane, resident with John Chalmers, in Greenock, and receives 6*l.* annually from the Poor Funds.
5. Agnes McKenzie, aged 14, idiot, resides with her mother in Greenock, and receives 4*l.* 16*s.* from the Poor Funds.
6. John Wilson, aged 18, idiot, resides with his father in Greenock, and receives 7*l.* 4*s.* from the Poor Funds.
7. Robert Lyon, aged 49, idiot, resides with his sister in Greenock, and receives 3*l.* from the Poor Funds.

MIDDLE, or new Parish.

1. Isobel Downie, formerly confined in Greenock Bridewell, was removed to the Lunatic Asylum at Glasgow last September, where she continues; boarded at the rate of 21*l.* 2*s.* per annum, payable from Parish Funds.
2. Graham Campbell, was sent to the Asylum in January last, and remains at the same board, payable from the same source.
3. Daniel Cameron, was sent to the Asylum on 2d May 1816, and is there at the same rate, and payable from the Parish Funds.
4. Mrs. McBryde, maintained in Greenock prison, where she has become in some sort an inmate of the Jailor's family, and useful in working. The Poor Funds pay upwards of 20*l.* yearly for her support.
5. Elizabeth McAllester, insane, is boarded with John McArthur, farmer, in the parish of Luss, at the rate of 15*l.* 10*s.* a year, payable from Parish Funds.
6. James McCulloch, resident with his sister here, and receives 4*s.* monthly from the Poor Funds.

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7. Joseph McAllester's son, an idiot, resident with his mother, a widow, here, receives at the rate of 52s. annually from these Funds.
8. Donald McDonald, lately become insane, resides with his father here, and receives at the rate of 5s. monthly.
9. Widow Campbell's son Robert, resides with her, and receives at the rate of 3s. monthly from the Poor Funds.
10. Mrs. John Weir, occasionally deranged, lives in her own house, and is supported by her husband. Sometimes frightens women and children on the highways.
11. Mrs. Orr, sent about 13th March 1816, by her husband John Orr, to Glasgow Asylum, where she is boarded at his expense.

East Parish of GREENOCK.

1. Janet Telfer, insane, is boarded with John McArthur, farmer, in Dumbartonshire, and receives 36l. 6s. yearly from the Poor Funds towards her support.
2. Ann Murray, idiot, is boarded with James Roger, smith, in Deer-Park of Greenock, and receives 2l. 8s. yearly from the Poor Funds.
3. Clementina Parker, idiot, is boarded with James Parker, shoemaker, in Crawford's-Dyke, and receives 2l. 8s. yearly from the Poor Funds towards her support.
4. Robert Rankin, orphan, idiot, is boarded with Mrs. McDonald, in Crawford's-Dyke; and there is paid 9l. annually towards his support from the Poor Funds.
5. Carolina Allan, orphan, idiot, is boarded with Mrs. Sage, in Crawford's-Dyke; and there is paid 6l. annually towards her support from the Poor Funds.

PORT GLASGOW.

1. — McKellar, formerly a soldier in the Renfrewshire militia, was sometime ago sent to the Asylum at Glasgow, where he is kept for 9s. per week, payable from Poor Funds.

2. — Donald, a barber, resident in Port Glasgow, is subject to occasional fits of insanity when overtaken in liquor.

3. Joseph Thomson, formerly a smith in Port Glasgow, is deranged, lives in his own house, and is taken care of by his wife, and is supposed at present to be dying. He is supported partly from parish, and partly from the funds of charitable societies. He was for some time in Greenock Infirmary, but was discharged as incurable and insane.

4. George Lane, a negro, is deranged and at large, without any fixed abode, sleeping in stairs and closes through the town from choice; is sometimes a bishop, and at other times a duke, as the mania operates; quite harmless.

Two persons from Port Glasgow, viz. James Park, a tide-water, and Angus McFie, a mason, had been sent to Glasgow Asylum, and were both returned cured. The first was accompanied by a certificate, that the excessive use of ardent liquor was the cause of his derangement; the other had been near a twelvemonth confined.

Besides the before-mentioned, of Port Glasgow, it may be right to add, that David Hutcheson, a cooper, had been sent from thence to the Asylum, where he remained some time, but got out, and has not been heard of; and that Mrs. Walker, a person subject to intermittent fits of insanity, is at present lucid, and resides with her son in a house of Bailie Gillespie, from which the son became obliged to remove, if his mother should relapse.

INNER KIP.

I am informed by the Clergyman, that there are only two deranged persons in that parish; the one a married woman, boarded at Glasgow Asylum at her husband's expense; the names he could not recollect, but promised to inquire and inform me; and the other Janet Boag, kept in the parish by her own relations, who had for a long time, unaided, provided for her. There has lately been allowed, 4l. 4s. annually towards her support, from the parish funds.

8 June 1816.

JOHN CONNELL.

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R E P O R T
FROM THE
SELECT COMMITTEE
ON THE
LUNATIC POOR IN IRELAND:
WITH
MINUTES OF EVIDENCE
TAKEN BEFORE THE COMMITTEE
AND AN APPENDIX.

*Ordered, by The House of Commons, to be Printed,
25 June & 2 July 1817.*

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R E P O R T.

THE SELECT COMMITTEE appointed to inquire into the expediency of making further Provision for the Relief of the LUNATIC POOR, in *Ireland*;—HAVE, pursuant to the Order of The House, inquired into the subject referred to them; and have agreed upon the following REPORT:

YOUR Committee have inquired, as to the extent of the accommodation which may be afforded by the present Establishments in the several Counties in *Ireland*, and are of opinion, that those Establishments are totally inadequate for the reception of the Lunatic Poor. An Hospital attached to the House of Industry in Dublin, was originally the only receptacle in that city for persons of the lower classes, who were afflicted with mental derangement; and the cells attached to the Infirmaries or Poor Houses in some of the counties were by no means calculated for the restoration to sanity, or even for the safe custody and care of the unhappy persons who were suffering under so dreadful a malady. Your Committee refer, on this subject, to the Evidence which they have received, and to the Documents and Returns which are annexed. In the year 1810, the necessity of applying some relief was brought by His Majesty's Government under the consideration of Parliament, and liberal Grants were made for the erection of an Asylum in Dublin, under the name of "The Richmond Lunatic Asylum," capable of accommodating two hundred patients. In the year 1815, one hundred and seventy Lunatics were removed from the House of Industry into the new Hospital; and yet so great has been the increase in the number of Patients transmitted from different parts of the Country, that though the Asylum has received to the full extent that it was capable of accommodating, and thus relieved the House of Industry from that number; still Your Committee find that there is now in the latter Establishment a greater number than there was at the period when the foundation of the Richmond Asylum was undertaken. This pressure is every day increasing; and as the majority of Patients are sent from the remoter parts of the Country, it is in vain to hope to diminish it, unless by the establishment of other Asylums, to be administered on the Plan which has been already acted on in the Capital.

Besides the Asylum in Dublin, there are other Establishments, and one particularly in the City of Cork; with the conduct and government of the last-mentioned, Your Committee has every reason to be satisfied. The success also which has attended the mode of treatment adopted in the Richmond Asylum has been very remarkable; and Your Committee refer with satisfaction to the testimony which they have received from one of the Governors of that Institution.

An Extract from the Register of the Asylum, which is given in the Appendix, will show how considerable has been the proportion of Cases in which restoration has followed the Treatment adopted; at the same time it is obvious that the general knowledge of the success of that Treatment, and of the existence of an Establishment in the Capital for the reception of Lunatics, supported by Parliamentary Grants, has induced the transmission to Dublin of numbers so great, that the Governors of the Asylum,

and of the House of Industry also, have been obliged to give a public Notice, that it is impossible for them to receive any more Patients from the Country parts of Ireland.

Your Committee beg leave to call the attention of the House to the detailed Opinion expressed by the Governors of the Richmond Asylum,—that the only mode of effectual relief will be found in the formation of District Asylums, exclusively appropriated to the reception of the Insane. They can have no doubt that the successful treatment of Patients depends more on the adoption of a regular system of moral treatment, than upon casual medical prescription; and they are distinctly of opinion, that if they were content to advise an addition to be made to the present County Hospitals only, it would be in vain to hope that each County could provide an efficient superintendence of its separate Establishment: A Bill was introduced into the House of Commons, in the year 1804, framed on the principle which is now recommended; and Your Committee cannot but regret that it did not then meet the sanction of the Legislature.

Your Committee are of opinion, that in addition to the Asylum which has been founded in Dublin, and that which has been so successfully established in the City of Cork, there should be four or five District Asylums capable of containing each from one hundred and twenty to one hundred and fifty Lunatics. They conceive that the determination of the places most suitable for the Sites of such Establishments may best be formed by the Government of Ireland; that it would be expedient for that purpose, that a Bill should be introduced into Parliament, empowering the Lord Lieutenant, with the advice of His Majesty's Privy Council, to divide the four Provinces of Ireland into Districts, according to the locality and the respective extent and population of the Counties to be comprised in them; and that the expense of the Asylum for Lunatics to be established in each District, should be borne by these Districts respectively.

The law having already recognized the principle, that Presentments should be made at the several Assizes, for the support of the County Infirmaries, Your Committee are of opinion, that it is only carrying into execution its benevolent intentions, to extend to a class of the poorer population so wretched as that into the state of which these inquiries have been directed, the relief and care which it is the duty of the State to provide for them; and they have no doubt that not only the expense will fall less heavily on the respective Counties, by adopting the principle they recommend of distinct Establishments, but that it is only in such that provision can be made of sufficient extent, or that medical skill and care can be obtained in the degree which the Public ought to contribute to the cure of malady, and the alleviation of wretchedness.

Your Committee believing that there are many public Buildings, such as Barracks for troops, and places for depositing military stores, which are no longer required to be so occupied for the Public Service, doubt not that the liberality of His Majesty's Government will induce the appropriation of such Edifices to the reception of Patients, if their local situation and other circumstances should point them out as suitable for the purpose. This subject having been under discussion in Your Committee, they are anxious not to leave it untouched, though they have no distinct recommendation to offer; nor, with propriety, could any flow from them.

With respect to the apportionment of the sum to be levied on each County within the respective Districts, Your Committee are not prepared to present any data to the House; but they recommend that the Lord
Lieutenant

Lieutenant in Council should be empowered to fix the contribution, and also to nominate Governors of the respective Asylums, and a Board of General Control and Correspondence; the Members of which should not receive any Salary or Emolument whatever.

Your Committee have observed with satisfaction, the disinterested labours of those who have superintended the Asylums in the Cities of Dublin and Cork; and if they were to go into any detail of the principles on which the Establishments which they propose might be best administered, they would earnestly recommend an entire conformity to the system laid down and acted on in the Richmond Lunatic Asylum, as that system appears to have been considered with great anxiety, and acted on with signal success.

In what Your Committee thus submit to the House, they desire to be understood as not wishing to interfere with either of the above-mentioned Asylums: the Establishment in the Metropolis has been supported, exclusively, by Parliamentary grants; and it would perhaps be only reasonable, if the Legislature should continue to defray the expense of it on its extended scale, that the County and City of Dublin should be called upon to contribute to the support of any other Lunatic Asylum which may be founded in the vicinity of the Capital; at least, Your Committee may anticipate, that by the formation of other receptacles for the Insane, the number now removed to the Metropolis will be considerably diminished, and that the expenditure which the Crown has been accustomed to recommend to Parliament, both for the present Lunatic Asylum and the House of Industry in Dublin, may be proportionally lessened also.

With respect to the County and City of Cork, the expense which the Grand Juries have already gone to, and the liberality and public spirit which they and the inhabitants of Cork have manifested, lead Your Committee to be of opinion, that under the auspices and care under which it has hitherto been conducted, the Establishment now existing may best be left. They are of opinion also that it will be sufficient, in the extent of its accommodation, for the future calls on it. Your Committee would however recommend that it should be subjected to the same visitation with the Asylums to be formed in other districts. With regard to their not being required to contribute to the support of any except their own Establishment, there are other grounds, arising from the extent and population of the County and City of Cork, which confirm Your Committee in that recommendation.

It will be expedient still, however, in the event of Parliament acting on the suggestion which Your Committee have taken the liberty to offer, that there should be provided in the General Infirmary in each county of Ireland two or three cells for the temporary custody of Lunatics, previously to their transmission to the District Asylums.

Your Committee refrain from suggesting any further details, deeming that the ulterior arrangements may be with more propriety determined by the executive Government; deeming it unnecessary, also, further to recommend to Parliament the consideration of a subject so materially importing the character of the Country, and so deeply interesting to humanity.

25 June 1817.

WITNESSES.

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MINUTES OF EVIDENCE.

Martis, 2° die Martii 1817.

The Right Hon. WILLIAM VESEY FITZGERALD, in the Chair.

Colonel Crosbie, a Member of the Committee; Examined.

IS there any County Infirmary in the county of Kerry?—Yes, there is a new one.

Colonel Crosbie.

Is there any separate accommodation for pauper Lunatics?—None that I am aware of.

Is there any surgeon belonging to the infirmary?—Yes.

Would there be any difficulty in attaching a separate asylum to the present Infirmary for Lunatics?—None whatever; there is a large yard in which it could be erected.

The Right honourable Sir George Fitzgerald Hill, Bart. a Member of the Committee; Examined.

IS there any separate Asylum for Lunatics in the county of Derry?—Yes.

How many can be accommodated?—There is accommodation for twelve.

Right Hon.
Sir George Hill.

Is that, in your judgment, sufficient for the reception and accommodation of the pauper Lunatics who may belong to the county?—At present they are; but they have not always been so.

Have you not been obliged to remove many persons of that description from your asylum to Dublin?—Yes; having more in that state than we can accommodate, we removed them to Dublin.

Is there any particular medical attendance provided?—That department comes under the head of the County Infirmary, and has their medical assistant.

Do you know, in point of fact, whether they do come under his care, equally with the other branches of the establishment?—Yes, I have occasion to know that they certainly do.

If called upon to give a precise answer and opinion, would you say that a more extended establishment than the present would be necessary at this time to accommodate the whole county of Derry?—With a view to accomplish the recovery of the patient, certainly; as I consider the present as merely affording an asylum for the existence of the individuals.

Is there any separate provision for the city?—No; the provision already mentioned, includes both city and county.

Are you of opinion that the form and construction of the Asylum for Lunatics, in the county of Derry, are such as would make it desirable to add to them, or to construct new places of reception for greater numbers?—The form and construction, for the mere custody, I consider sufficient, but very different from what they ought to be, with a view to accomplish the cure of the patient.

When were the present buildings constructed?—About five years ago.

What was the expense, as near as you can guess?—About 750*l.*; being detached from the body of the infirmary, they are mere sheds against one of the inclosing walls.

Do you recollect what the annual presentment is for the support of this branch of the infirmary?—I do not; it is estimated for with the general estimates for the supply of the infirmary.

[Sir John Newport, in answer to a question from the Committee, read extracts of two letters which he had received on the subject, as containing the best information which he could afford the Committee.]

[Colonel Longfield begged to follow the course adopted by the honourable Member, and read a statement, which he had received from the county of Cork.]

Martis, 25^o die Martii, 1817.

The Right Hon. WILLIAM VESEY FITZGERALD, in the Chair.

The Right honourable *Robert Peel*, a Member of the Committee, delivered in several Papers, which were read, and are inserted in the Appendix. [*Vide Appendix, No. 2.*]

Robert Shapland Carew, Esq. a Member of the Committee; Examined.

*R. S. Carew,
Esq.*

WILL you have the goodness to state, what accommodation there is in the county of Wexford for pauper Lunatics?—The place that had been used as the old gaol, when the new gaol was built, was appropriated to the reception of paupers and Lunatics: the furnishing of it and outfit was accomplished by private subscriptions, which was assisted last summer by a presentment of 600 *l.* from the grand jury.

When was this establishment formed?—I believe in January 1816; but I do not recollect exactly the time.

Previous to that, there was no accommodation in the county of Wexford for the reception of such persons?—Not exclusively; there was a dispensary in every town, in which a certain number of patients were received.

Were they calculated for the reception of Lunatics?—I think not.

Are those dispensaries under the Act?—Yes; the Act says, that in proportion to private subscriptions, there shall be a power in the grand jury to grant a similar sum. There are seven dispensaries in the county of Wexford.

Is there any County Infirmary?—There is a County Infirmary besides.

The County Hospital is at Wexford?—Yes.

Do you consider the accommodation which this new establishment affords, sufficient for those persons in the county?—There were a great many idiots about the streets of Wexford, and there are none now, so that from that I should think it is sufficient.

Can you state the number of Lunatics now in that Asylum?—No.

Under whose immediate superintendence are those persons?—There is generally a committee from the grand jury; three, four or five of the gentlemen of Wexford, and its vicinity, inspect it.

Under whose medical direction?—The medical men of the town attend it gratis.

Is there no person particularly responsible for the medical attendance and care of the lunatics confined in this Establishment?—There is a physician, who has the care of the infirmary, but I do not know if he is responsible for the management of this Establishment; I believe not.

Do you conceive there would be any difficulty in making an addition of a few cells to the County Infirmary to receive Lunatics?—As we have a house fitted up and adapted to that purpose at a different end of the town from the Infirmary, it would be an useless expense to us; but if we had not such a house, I think it would be a saving of expense; it would be cheaper to add to the Infirmary than to build a separate establishment.

Have you any recollection what the annual expense of this Establishment has been, or has been estimated at, and is likely to be?—No, I have not, without referring to a paper, which I shall be able to lay before the Committee in a few days.

John Leslie Foster, Esq. a Member of the Committee; Examined.

*John L. Foster,
Esq.*

ARE you a governor of the Richmond Lunatic Asylum?—I am.

The Committee are anxious to learn, generally, the extent of that Establishment, the accommodation afforded to Lunatic patients, and, as far as your recollection serves you, the general discipline under the authority of the governors?—The Richmond Lunatic Asylum was built originally out of public money granted by Parliament; it was opened in the last year; it contains sufficient accommodation for 200 patients; in addition to which, a ward is now preparing, and nearly completed, for about thirty convalescents, as nearly as I can recollect. The Asylum is subjected to the direction of fifteen governors, who meet once a fortnight, and pay great attention to the management of the Institution.

Is not that Institution rather intended for the cure, than the mere custody of the patients?—It certainly is so intended, but it was filled, in the first instance, by patients drafted from the House of Industry, most of whose cases were of very long standing, and in such there is little or no chance of recovery; of the recent cases which

which have been admitted, I believe I may say that a majority have been cured. The House of Industry, in the first instance, naturally wished to be relieved from as great a number as possible of the Lunatics that were confined under their care, but the governors of the Richmond Asylum as naturally preferred to receive such cases as they thought susceptible of relief. In point of fact, I should think that at least half the cells in the Richmond Lunatic Asylum are occupied by desperate cases; I believe the Asylum was originally intended by Government, both for the custody of confirmed Lunatics, and for the cure of such patients as might be found curable; but the governors feeling how much more instrumental in general relief it might be, by giving to it the latter direction, have endeavoured, as far as in them lies, to give a preference in their admissions to such patients as have not been very long under the influence of the malady, believing that in a majority of instances a recent case of insanity may be reasonably hoped to be cured in a few months.

Do you think the building of the Richmond Lunatic Asylum relieved the pressure on the House of Industry, or that the notoriety that a large building was constructed in Dublin increased the number of applications from the country for admission into the House of Industry?—When the idea was first conceived of building the Richmond Lunatic Asylum, there were, as I understood, about two hundred Lunatics in the House of Industry; upon opening the Asylum two hundred were drafted from the House of Industry, and I am informed that very shortly afterwards there were about three hundred and seventy Lunatic cases remaining in the House of Industry, which they wished us to receive, but which was of course impossible. I have no hesitation in saying that the knowledge, now general in Ireland, of there being such an Institution in Dublin, has contributed to augment the pressure in a very great degree, and that the applications for admission to our Institution very far exceeds the means of receiving them.

Is it within your knowledge that the governors of the House of Industry have been obliged to give a public notice within the last few months, that it is totally impossible for them to receive any Lunatic from the country parts of Ireland?—It is; and I believe that they conceive themselves in some degree justified in doing so, by thinking that such reception has become rather the province of the Richmond Lunatic Asylum.

Do not you think the accommodation in the House of Industry for Lunatic patients is so defective that upon the whole it is a less evil to exclude them than to admit them?—The accommodation, so far as it goes, in the House of Industry, has been, I conceive, excellent since the institution of the Richmond Asylum, but it is inadequate to meet the number of applications made to them. I beg to explain what I have said; there are a certain number of cells in the House of Industry, perhaps about a hundred in number, in which the patients have of late, in my opinion, been very nearly as well accommodated as in the Lunatic Asylum; in fact, when our improved mode of treatment, in the contiguous building of the Richmond Lunatic Asylum, became adopted, it was naturally adopted in the House of Industry, as far as their means of accommodation permitted, but the number of cells in the House of Industry being quite inadequate to accommodate the number of Lunatic patients that remained in their care, notwithstanding all the relief that the Richmond Lunatic Asylum could afford, the accommodation for such patients as could not be received into the cells, continued as defective as can possibly be imagined; I have seen three, I think, certainly two Lunatics in one bed in the House of Industry. I have seen, I think, not fewer than fifty or sixty persons in one room, of which I believe the majority were insane, and the rest mere paupers not afflicted with insanity. I have seen in the same room a Lunatic chained in a bed, the other half of which was occupied by a sane pauper, and the room so occupied by beds that there was scarcely space to move in it: in stating this, however, it is but justice to the governors of the House of Industry and to the medical gentlemen connected with that Establishment, to state that, supposing the admission of Lunatics and paupers to be, as in fact it then was, unrestrained, it was physically impossible that they could be better accommodated.

It appears by the Report of the medical board, which is before the Committee, that in five years 1,179 fresh cases of lunacy have been admitted into the House of Industry, or on an average 235 annually; deducting the number of deaths and cures in the House of Industry, and the Lunatics which the Richmond Lunatic Asylum can provide for, do not you think a number of Lunatics would remain for which the House of Industry must be utterly incompetent to provide?—I have no doubt the number would greatly exceed the power of accommodation.

Has the experience you have acquired, from your situation as governor of that Institution, enabled you to form a judgment of the best means of relieving the pressure

John L. Foster,
Esq.

sure in Dublin, by the formation of Lunatic Establishments?—I am certain that the means of accommodation at the Richmond Lunatic Asylum, are, in point of fact, totally insufficient to meet the daily increasing demands for admission from all parts of Ireland into that Institution; and I conceive this inconvenience is likely to increase in proportion as it becomes better known that there exists a large Institution in Dublin where patients are likely to receive a superior degree of attention. It appears to me the most eligible mode of obviating this inconvenience, to establish a few Institutions in other parts of Ireland, conducted upon similar principles. I do not think that additions to the respective County Infirmaries, would be well calculated for that purpose, believing it to be much more likely that a proper mode of treatment would be adopted and well administered in a few larger Institutions dedicated exclusively to that purpose. I will, however, with the permission of the Committee, communicate this question to the other governors; and as I understand the Committee do not re-assemble till after the recess, I will then present the Committee with the result. I do not mean to say that it might not be convenient, as a measure of internal police, to have in a limited degree accommodation provided in each county hospital for the temporary detention of Lunatics, before they should be transmitted to the large establishments, but I do not think the patients would be so likely to meet a cure there as in the large establishments.

Is the opinion given in the answer to the last question, intended to apply as well to Institutions for the reception, as to Institutions for the care of Lunatics?—I think it would be impracticable to have one set of Institutions for the custody of incurable Lunatics, and another set for the care of curable Lunatics; because it can be seldom ascertained, in the first instance, whether the case is curable or not; the evil, however, of maintaining a large number of incurable Lunatics would become greatly diminished, if the new and improved treatment of lunacy should become generally established, because I conceive that under such, a great majority of lunatic cases would be cured.

As you have expressed an opinion that local County Asylums for Lunatics, would not be the most advisable to adopt, would not one Establishment in Dublin, upon a sufficient scale for Ireland, be less expensive and more conducive to ultimate cure?—I conceive the inconvenience of transmitting individuals from the remote parts of the country, would more than overbalance the advantages to which the question alludes: in addition to which, I would say, that the number of patients in such an Institution would, I think, be greater than could well be managed in any one place.

Are you not of opinion that the transmission of Lunatics, under the circumstances under which it would be necessary to remove them from the country to a general Asylum in Dublin, would greatly retard, and in some instances prevent their restoration to society?—I am decidedly of that opinion; I believe it to be of the greatest importance, in cases of incipient lunacy, to avoid every unnecessary addition of irritation which can be avoided; and it is evident that the various degrees of coercion indispensable for the conduct of Lunatics in removing them from remote parts must give rise to great irritation, and in very many cases would, I believe, render incurable cases which otherwise might have been relieved.

You have spoken of a new and an improved system of treatment having been adopted in the Richmond Lunatic Asylum, the Committee wish, if you feel yourself competent to the explanation of it, that you would give them some details of what that system has been, and what its success?—Until within these very few years a much greater degree of coercion has been generally applied in the treatment of Lunatics, than is now found to be necessary; a few years ago Mr. Pinel, a French Physician, who had the charge of the principal receptacles for the insane at Paris, proposed and published a more gentle mode of treatment. It appears in his hands to have been attended with great success; this mode was introduced into this country, I believe, in the first instance in the Quakers Asylum near York; the good effects of which are illustrated in a publication of a Mr. Took, the manager of that Asylum; and this system appearing to the governors of the Richmond Lunatic Asylum to be founded in good sense, they determined on trying the experiment in their new Institution. I beg to add as a proof of this, that there is not in the Richmond Lunatic Asylum, to the best of my belief, a chain, a fetter, or a handcuff. I do not believe there is one patient out of twenty confined to his cell, and that of those who are confined to their cells, in the greater number it is owing to derangement in their bodily health, rather than to the violence of mania. When I was last in the Richmond Lunatic Asylum, I do not think, that out of the two hundred patients, there were above three or four to whom even the application of the strait waistcoat was found

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John L. Foster,
Esq.

found necessary; the disorder is treated not so much as a subject of medical care, as of the superintendence of a person, who is termed the moral governor, and whose particular business it is to attend to the comforts of the patients to remove from them causes of irritation, to regulate the degrees of restraint, and to provide occupation for the convalescent.

The Right Honourable *William Conyngham Plunkett*, a Member of the Committee; Examined.

Right Hon.
W. C. Plunkett.

HAVE you any knowledge of the mode of treatment adopted in Swift's Hospital for the cure of Lunatic patients, and of the accommodation provided for them there?—I have not from my own personal observation, but I have received a letter on the subject from the medical attendant on the Institution, and which, with the permission of the Committee, I will give in.

[*It was delivered in, and read. Vide Appendix, N° 3.*]

The Right Honourable Sir *John Newport*, Bart. a Member of the Committee, made the following Statement.

Right Hon.
Sir John Newport.

I WISH for an opportunity of exemplifying to the Committee, the grounds on which I entertain a conviction that the present provision for Lunatics, as connected with Houses of Industry, is totally inadequate to the object of cure, can only answer for their custody, and must in its consequences produce redundancy of claims upon the Institution, of such a nature, as in a little time to cause an overflow in every one of those Establishments. It will appear by the list of Lunatics and Idiots returned from the House of Industry of Waterford, that of forty-four persons confined in that establishment, more than one-third have been above seven years confined; that there are several cases of more than twenty years standing, and that although the number admitted in the year 1816, amounted to only seven, yet from the paucity of cases in which cures were effected, the redundancy has been so great as to produce the present number of forty-four, to which are to be added more than twenty cases, which about five years since, in consequence of their belonging to other counties, were removed from thence to Dublin, by direction of Mr. Secretary Pole; it will also appear, from the list to which I refer, that a very considerable proportion of the entire number are idiots, who have mostly become so, having been for a certain period of time lunatic, and then sinking into idiocy.

Martis, 6^o die Maii 1817.

The Right Hon. WILLIAM VESEY FITZGERALD, in the Chair.

John Leslie Foster, Esq. a Member of the Committee, again Examined.

John L. Foster,
Esq.

YOU undertook, at the desire of the Committee, to obtain some information from the Governor of the Richmond Lunatic Asylum in Dublin; have you received the communication you expected?—I have received several papers from the Richmond Lunatic Asylum, and from the House of Industry, which I beg to give in.

[*They were delivered in, and read. Vide Appendix, N° 2.*]

Have you looked at the register of the Asylum, which has been laid before the Committee?—I am constantly in the habit of seeing it at the Asylum, and examined it particularly to-day.

Can you form a probable conjecture of the proportion of any given number of patients admitted, on whom a cure may be expected?—I see that during the first six weeks of the year 1816, there were 85 patients admitted into the Asylum, of those, 19 appeared to have been cases of long standing, and transmitted from the House of Industry: those cases of long standing very seldom afford any chance of cure; 66 appear to be in fact the number of whom any cure could reasonably be expected, and of those it appears that 27 have been already discharged as cured, and it is but reasonable to hope that the remaining 39 may be discharged hereafter.

Die Mercurii, 7^o die Maii 1817.

The Right Hon. WILLIAM VESEY FITZGERALD, in the Chair.

*Thomas Rice, Esq. called in; and Examined.**Thomas Rice,
Esq.*

THE Committee are anxious to receive information from you, which they believe you are competent to give, of the state of the Asylums for Lunatic Poor in Ireland?—My experience has been entirely confined to the Establishments in the south of Ireland: these I have visited; and though my visits are of two years standing, I have kept up a communication with them, which enables me to say that I am pretty well acquainted with those establishments. In the county of Limerick I have acted as life-governor, and member of the regulating committee for that Lunatic Asylum for the last three years; and upon that point I can give most important information. It was in the year 1815 that I visited the Asylums of Cork, Waterford, Clonmell and Limerick, and I shall state, with the permission of the Committee, the observations that occurred to me in the order of the visits.—To being with Cork; I hold returns in my hand, which I shall take the liberty of laying before the Committee, because they contain some points of information not comprehended in the return I have just seen; namely, that prodigious increase of the number of Lunatics within a given time; that return merely alludes to the present state; this return alludes to the last sixteen years, which prove a most alarming increase of the number of the insane. In the year 1800 the number of insane, of idiots and lunatics upon the Establishment of Cork, amounted to seventy-two; in the year 1816, they have increased to the number of two hundred and nineteen. I mentioned the fact to a very competent authority opposite to me, and he conceived that this accumulation might not have been the increase of admissions so much as the accumulation of numbers by reason of no cures taking effect, and no consequent dismissals; but, in the Establishment at Cork I do believe strongly, that if the Committee had the number of dismissals upon cure, and the number of deaths which have been incident to the Establishment, they would find that the far greater proportion of this increase is to be altogether attributed to the increased number of admissions, and in consequence the increase of the malady provided for by the Establishment.

Do you not think, that of the persons insane, within your district, a greater number are sent to the Asylum of late years than formerly, by which the increased number of patients admitted into the Lunatic Asylums may be accounted for, without any actual increase of insane in those districts?—I should consider that would be decidedly the case, if there were not one or two characteristics acknowledged in madness, which is its hereditary properties, that is one; another, as a great cause of temporary madness in Ireland, according to the best information I have received, arises from the increased use of spirituous liquors. In the example I have mentioned of Cork, I admit, a general conclusion is not to be drawn, because the establishment at Cork has gained so high a reputation, that there are a vast number of individuals sent to it from districts wholly unconnected with the city or county of Cork; but in going round, and applying these observations to the other establishments, it will be found that there is a correspondent increase, even upon those which are to be found throughout the whole of Munster. The Lunatic Asylum of Cork is connected with the House of Industry at that place, but it is connected with it under very peculiar circumstances indeed, to which the attention of the Committee might perhaps be directed. The Lunatic Establishment, in point of architecture, is distinct, forming a quadrille to the part erected at a most liberal expense of public money, wholly distinct from the funds of the House of Industry; the public money expended on the combined establishments in Cork, has amounted, in sixteen years, to between seventy and eighty thousand pounds; the Committee will easily judge, by subtracting from the amount, the sums allowed to be presented for the House of Industry alone, how much and how great has been the expenditure upon the Lunatic Asylum; therefore, in architecture, it is, in the first instance, distinct, and in expenditure it is also distinct. The Establishment at Cork struck me as being the best managed, not only that I had ever seen, but ever considered or heard of, realizing all the advantages of Took's Asylum at York; but if the question were put to me, whether it would be desirable

desirable, in a national point of view, that the Establishment at Cork, administered as it now is, should continue in its present condition, I should decidedly say, no. I think its success is a success of circumstances almost of accident; I think its system is radically wrong, and I shall state the motives upon which that opinion is grounded.

Do you mean the system of its government?—Certainly; it derives every thing, that can be derived from humanity and skill, from the physician who is at the head of it; but those sums of public money are all presented under one Act of Parliament, to which the attention of the Committee has, I make no doubt, been strongly directed; it is the only Act upon which Lunatic Asylums can be at all carried on in Ireland at present; it is, in short, the only law that regulates them, and it is upon the expediency of that law, that much of the attention of the Committee, no doubt, will turn. I have looked at the 27th of the King, cap. 39, section 8, and it is one section that stands unrepealed in an old Gaol Act, all the rest of which has been repealed, and it is the only Act upon which the Cork Asylum stands; this allows sums of public money to be presented for the use of Lunatic Asylums, without limit of any description; it allows to magistrates to commit to such Lunatic Asylum, as may be proved, any individuals, whether idiots or insane; it provides no mode of government whatever for the Establishment when formed; it provides no due mode of account for the money when presented. Such is the Act upon which the Establishment at Cork now depends; if therefore money, which may be unlimited in its grant, has been limited by judgment; if magistrates having an unlimited power to commit, have not exercised that power improperly, (by which I mean acting without medical skill, there being no medical certificate provided for by the Act;) if without a due account provided by law, a due mode of account has been provided by an individual; I may perhaps be warranted in thinking that more has been due to the man who has directed that Establishment, than to the system under which that Establishment exists.

Then what you state as your objection to the Cork Establishment, is not to the government of it, but to the law under which it is constituted, and under the authority of which funds for its support are supplied?—Certainly.

Have the goodness to state your opinion of the other Establishments which you have visited?—I next visited the Establishment at Waterford, which consists of a few miserable cells attached to the House of Industry, resembling an ill-constructed gaol rather than a retreat for Lunatics; the system of government at Waterford was what struck me most, and a part which appeared most characteristic in it; a board of governors meet monthly, they appoint the committee for a month, who meet weekly, appointing from their number visitors, who attend daily: this produces a system of constant inspection and control, without which, it is but vain to expect the prosperity of any Establishment that may be devised. I rely the more upon this point, because the system has been copied at Clonmell, where its good effects have been equally acknowledged. Another characteristic of the Waterford Establishment is the great private subscription they have received, amounting to an average of 5,000 *l.* a year; and it is to be noted, that this is the only Establishment in the South of Ireland upon which any considerable proportion of money is bestowed in the shape of private subscriptions.

Confining what you state to the province of Munster?—Yes. The average income and expenditure of Waterford Establishment varies from 3,000 *l.* a year upwards.

From what funds, beside subscriptions, is that income derived?—There are funds provided by the city and county Presentments; of 800 *l.* from the city, and 1,400 *l.* from the county; that was the maximum.

For the Lunatic Establishment alone?—No; I stated for the combined establishment.

The combined Establishment for the Lunatic Asylum and the Houses of Industry for both the county and city of Waterford?—Yes. In this part of my evidence I beg to take the liberty of stating, that in every public Establishment in the south of Ireland which I have visited, I have found the prosperity of the Establishment best attended to, and its funds most increased, by the exertions of one class of individuals, on whose attention and vigilance, in the event of governors being appointed, the Committee might I should conceive rely. I allude to the quakers of independent fortunes and stations throughout the south of Ireland; and I feel myself warranted in stating, that there is not one establishment which I have seen, Cork excepted, which could continue on foot for half a year without the exertions

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and sacrifices of time and of money given by the individuals I have alluded to. I shall next proceed to make some observations upon the Establishment at Clonmell; the Lunatic Asylum and House of Industry have been lately rebuilt at a considerable expense, and as it is rebuilt expressly for this object, it is the only establishment in which the principle of new institutions directly apply; it is built at an expense of about 14,000*l.* and might accommodate, in the event of its being appropriated to the reception of Lunatics alone, about two hundred individuals: its support is derived exclusively from county presentments, which vary from 1,400*l.* to about 1,600*l.* a year; it is administered by the same mode of government I have described at Waterford; but although much vigilance is exercised in its direction, and much benevolence, all the vices of attaching Lunatic establishments to Houses of Industry are here very strongly apparent. Here the experiment is tried under great advantages, and here the experiment fails. There were thirty-two Lunatics at the time I visited Clonmell, that was in the year 1814-15, but so little understood was the management of the insane that they were unable even to keep them clothed, and some were lying in the yard upon straw in a state of nakedness; I inquired at Clonmell the general average at which they computed a Lunatic might be maintained, and the reply was "20*l.* a year by the head." This question I have asked also at Cork, and received a similar answer, but with a limitation that that computation was founded in times of high prices, and on paying a heavy rent; if the Establishments were discharged from rent, and as the prices of most of the articles consumed (which were infinitely higher then than at present) became reduced, they could be supported at a smaller sum. This comprehended clothing twice in the year; food of the most wholesome and best description, and all the expenses of repairs, and the expenses of medical attendants and medical officers. After having visited Clonmell, I returned to Limerick; in the Establishment of which city, I found a contrast to all the merits, and an example of all the faults that I have met with in all the other Asylums that I have visited; but in Limerick was exemplified the assertion which I have already made, of the vast increase of insanity; for in the year 1804, the Establishment containing fourteen, extended, in the year 1817, to forty-eight; now speaking from my own feelings, I think that fewer would have been sent into that Establishment within the last five years, than within any ten years preceding, the reputation of the Establishment had sunk so low; the building appropriated to Lunatics in Limerick, was built about the year 1777, at private expense; and though it has existed to the present period, there has been no specific appropriation of public money whatsoever; it has, in short, lived upon the pillage of the House of Industry, to which it has been attached; the presentments afforded by the grand juries having always been the minimum authorized for the House of Industry alone.

Do you mean by that, the lowest sums that the grand jury are required to present?—I do.

What is that sum?—It is 500*l.* under the Act of 1806.

Have you any thing further to state upon the subject of the Limerick Asylum?—I hold in my hand a plan of the Lunatic Asylum of Limerick, in which the accommodation afforded to the insane will appear to be such as we should not appropriate for our dog-kennels; it consists of one arcade, an open arcade, behind which cells have been constructed with stone floors, without any mode of heating or of ventilating, and exposed during the whole of the winter to the extremities of the weather. The effect of this system has been that mortification in the extremities, to which the insane are peculiarly liable, frequently takes place; and I know of my own experience, an instance in which amputation was the necessary but painful consequence; and during the present year (the late months of winter) I am informed by the physician who attends the establishment, that the death of two patients was to be exclusively attributed to the extreme coldness of the situation.—Nor is this all. Here are a range of thirteen cells: by a reference to the returns upon your table, you will perceive that these thirteen cells are to be occupied by thirty-three Lunatics and Idiots: some of these are consequently thrown into other parts of the establishment, it being impossible that they could all have accommodations found within; but two, and sometimes, I believe, three of the insane have been condemned to lie together in one of those cells, the dimensions of which are six feet by ten feet seven inches; some of them in a state of furious insanity. In order to protect them from the obvious results, the usual mode of restraint was by passing their hands under their knees, fastening them with manacles, fastening bolts about their ankles, and passing a chain

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a chain over all, and then fastening them to a bed. In this state, I can assure the Committee, from my own knowledge, they have continued for years, and the result has been (and I believe an honourable friend of mine may also have witnessed the fact) that they have so far lost the use of their limbs, that they are utterly incapable of rising. The rooms over the insane cells, the Committee can see, by inspecting the plan, are appropriated for the sick, as well as for such insane as may be trusted at large without actual danger. The general want of arrangement in the establishment, and the probable consequences of want of arrangement in all establishments conducted upon such principles, will be exemplified by two instances, which came before my own view, and which I shall lay before the Committee. In one of those rooms I found four-and-twenty individuals lying, some old, some infirm, one or two dying, some insane, and in the centre of the room was left a corpse of one who died a few hours before. Another instance was still stronger: in the adjoining room I found a woman with the corpse of her child, left upon her knees for two days; it was almost in a state of putridity. I need not say the woman was almost in a state of distraction; another was so ill that she could not leave her bed; and in this establishment, with governors ex officio, and with all the parade of inspection and control, there was not to be found one attendant who would perform the common duties of humanity. Two other points I shall take the liberty of laying before the Committee, one is material, as relating to the medical attendance given in those establishments; the other, as to the abuses which are likely to prevail in them. During an interval of three weeks, with the hospitals full of sick, with the gaol fever spreading through every part of the establishment; upon inquiry, it appeared that all medical attendance had been discontinued, even by the physician, paid at the expense of the public, for I wish to have explained to the Committee at this time the substitution which was given for medical attendants, the cases were reported to the physician at a mile and quarter distance, and upon that report, made by a person of no medical knowledge, prescriptions and directions were given: that I wish to state, to limit my former assertion. The most atrocious profligacy in another branch of the establishment had prevailed, which I wish to lay before the Committee; the keeper of the lunatics claimed an exclusive dominion over the females confided to his charge, and which he exercised in the most abominable manner; I decline going into the instances, the character of which are most atrocious. I hold in my hand extracts from the Report of the Committee of the House of Industry, which possibly may be material, and which I will take the liberty of submitting to the attention of the committee.

[It was delivered in, and read. Vide Appendix, N° 2.]

You have stated several acts of misconduct in the superintendent of the Lunatic Asylum at Limerick; is the same person the superintendent of the House of Industry also?—He was removed in consequence of that misconduct; but at the time it took place, he was work-steward, as well as keeper of the Asylum.

Then he is no longer superintendent of that establishment?—He is not.

What appointment has been made in his place?—I was commissioned to apply to Dr. Hallaran of Cork, upon whose advice we relied, and he provided us with two attendants, one male and the other female, who are at present in charge of the Lunatic Establishment at Limerick.

Do the medical superintendents continue the same as they did at the time you alluded to in your evidence?—They do not.

What alteration in that respect has been made?—A general application was made to the gentlemen of the profession in Limerick to offer gratuitous service, the funds of the establishment not being adequate to afford a salary; several gentlemen offered their services, and the duties of the house were divided amongst them. An individual different from that person who had been entrusted with the former conduct of the Lunatics has been appointed, and has since performed the duties of his office with attention and effect.

Was the medical person, with respect to whom you have given testimony, the same to whom was confided the whole care of the House of Industry?—He was.

Does he continue at the head of that establishment?—He does not.

Is he at the head of any public establishment in Limerick?—I believe not.

Is any payment made by the county for any medical aid now received?—None, further than for the payment of drugs, and the manual duties of the apothecary.

Jovis, 8^o die Maii 1817.

The Right Hon. WILLIAM VESEY FITZGERALD, in the Chair.

Thomas Rice, Esq. again called in; and Examined.

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YOU referred yesterday to the expense which had been incurred in the formation of the establishment of Houses of Industry and Lunatic Asylums, in Cork, Waterford, Limerick and Clonmell?—I did.

You then said you would furnish the Committee with a detailed statement of what the sums expended had been, as well as of the incomes of those foundations, and the sources from whence they were derived?—I did.

[Statements delivered in, and read; as follow.]

STATEMENT of Clonmell House of Industry and Lunatic Asylum.

YEAR.	Total Persons.	N ^o of Lunatics.	Total Income.	County Presentments.	OBSERVATIONS.
			£. s. d.	£. s. d.	
1814-15 -	137	32	1,600 — —	1,600 — —	Expense of Building, about £.14,000. Diet per diem, 5½d.

STATEMENT of the Cork House of Industry and Lunatic Asylum.

YEAR.	Total Persons.	Number of Lunatics.	Total of Income.	County Presentments.	City Presentments.	Private Subscriptions.	OBSERVATIONS.
			£. s. d.	£. s. d.	£. s. d.	£. s. d.	
1800	138	72	2,173 2 1	530 14 —	433 17 —½	86 9 —	The numbers are taken at the Spring Assizes in every year. The column of Income comprehends all grants for Building, Interest on Stock, &c.
1801	184	67	2,730 18 6	712 18 4½	710 3 5	55 10 —	
1802	184	71	2,589 9 2	620 2 9	559 3 2	55 14 9	
1803	198	86	3,201 18 1	797 10 6½	692 4 2½	42 2 2	
1804	216	90	3,622 16 10½	1,096 12 8	890 11 3	44 7 3	
1805	231	97	4,036 11 10	1,196 17 1	996 11 —½	60 19 —	The expense of a Lunatic may be taken at £. 20 annually, in high times, and paying a heavy rent for the Asylum, including all Expenses, Salary, Clothing, &c.
1806	258	107	3,808 17 9	1,143 18 6	927 1 3½	83 — 9	
1807	259	132	5,778 10 2	1,218 14 4½	989 18 2	48 18 3	
1808	300	141	4,954 19 2½	1,433 17 1½	1,177 5 4	59 3 7	
1809	279	153	6,612 19 6½	1,294 2 7	1,024 — 2	46 8 —	
1810	351	149	6,336 3 4½	1,413 8 9	1,124 18 —	158 13 3½	
1811	412	159	7,079 1 9½	1,421 7 7½	1,132 8 7½	48 10 —	
1812	364	167	6,446 6 7½	1,588 18 5½	1,216 11 3	31 17 —	
1813	470	173	6,276 14 1	1,637 15 2	1,232 2 7	28 8 9	
1814	409	179	7,716 12 4	1,597 2 9	1,241 7 11	22 4 9	
1815	441	188	7,817 6 11	1,557 6 7	1,256 8 6½	33 13 3	
1816	557	219	3,264 5 9	915 2 7	823 14 5½	30 14 2	

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STATEMENT of the Waterford House of Industry and Lunatic Asylum.

YEARS.	Total of Persons.	Number of Lunatics.	Total Income.	City Presentments.	County Presentments.	Number of Beds.	N ^o of Cells for Lunatics.	
			£. s. d.	£. s. d.	£. s. d.			
1804	218	-	- - -	- - -	- - -	161	16	
1805	227	-	1,421 - -	200 - -	400 - -	161	16	
1806	-	-	- - -	- - -	- - -	161	16	
1807	238	-	- - -	- - -	- - -	161	16	
1808	223	-	2,182 - 8	400 - -	700 - -	161	16	
1809	261	-	1,973 4 1	400 - -	700 - -	161	16	Numbers taken at Spring Assizes.
1810	247	-	- - -	- - -	- - -	161	16	
1811	249	40	2,020 - 6 $\frac{1}{2}$	400 - -	700 - -	161	16	
1812	255	-	2,763 15 7	700 - -	1,000 - -	161	16	
1813	238	40	2,484 18 4 $\frac{1}{2}$	700 - -	900 - -	165	16	
1814	242	39	3,328 8 -	800 - -	1,200 - -	170	16	
1815	272	45	3,005 8 2	800 - -	1,300 - -	170	16	
1816	275	50	3,260 14 7 $\frac{1}{2}$	800 - -	1,400 - -	170	16	
1817	274	42	3,007 13 2 $\frac{1}{2}$	800 - -	1,200 - -	170	16	

STATEMENT of the Limerick House of Industry and Lunatic Asylum.

YEARS.	Total Inmates.	Number of Lunatics.	Total Income.	City Presentments.	County Presentments.	Number of Beds.	Number of Lunatic Cells.	
			£. s. d.	£. s. d.	£. s. d.			
1804	170	14	- - -	- - -	- - -	70	15	
1805	132	16	- - -	- - -	- - -	56	15	
1806	154	12	- - -	- - -	- - -	64	15	
1807	175	29	- - -	- - -	- - -	75	15	
1808	174	23	- - -	- - -	- - -	76	14	
1809	153	28	1,010 1 9	200 - -	400 - -	65	14	
1810	158	32	1,350 12 -	200 - -	400 - -	67	14	
1811	201	35	1,176 - 10	200 - -	400 - -	84	14	
1812	230	36	1,171 8 5	200 - -	400 - -	94	14	
1813	223	30	1,157 12 4 $\frac{1}{2}$	200 - -	400 - -	90	14	
1814	212	35	1,383 4 10 $\frac{1}{2}$	200 - -	400 - -	82	13	
1815	302	38	1,358 6 1 $\frac{1}{2}$	250 - -	400 - -	132	13	
1816	291	43	1,325 12 8	250 - -	500 - -	129	13	
1817	286	48	1,310 16 4	250 - -	400 - -	128	13	

In these accounts is included the number of Lunatics which appear to be provided for at the Spring Assizes, during each of these years respectively?—Yes.

The Committee are desirous of knowing, whether you have turned your attention, since you were last here, to the other subjects to which you referred; namely, what establishments might be necessary in the south of Ireland, in the event of its being deemed advisable to separate the Asylum for Lunatics from the general Houses of Industry; and what expense might be incurred in supporting them?—I have; I have

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considered, as a leading principle, that the districts in which Lunatic Asylums are to be erected, should be sufficiently large to make the expense, comparatively speaking, a small local charge. I have considered that they should be sufficiently small to enable the transportation of Lunatics to take place, without any of the consequences by which it is unfortunately at present attended. I have considered it also essential, that wherever the establishment is fixed, it should be in some situation so prominent, so immediately before the public eye, as to insure, in the first place, constant inspection on the part, not only of officers, but of the public at large, and of the individuals who are subject to the payment of local taxes, who have acquired, if I may so term it, a right to see these funds properly laid out: and also, in the second place, in a situation sufficiently populous as to afford due medical aid for the proposed establishments. If these principles are correct, it struck me that Cork, Limerick and Clonmell, or Waterford, would be the situations for the south of Ireland. The county of Cork, I considered, might include the southern and south-eastern parts of Kerry. The division of Kerry, as bounded by the river Feale, might be thrown into the Limerick district, which might also comprehend the county of Limerick, the county of the city of Limerick, the county of Clare, and possibly the western part of the county of Tipperary. The Clonmell district would comprehend the remaining part of the county of Tipperary and that of Waterford. This would include, (speaking in round numbers) a district of about 1,500,000 acres, and assuming that the funds were provided from local sources, a tax of one penny an acre would, in my view of the subject, provide for the funds of all the establishments. My motives for fixing these situations in preference to the other county towns of Munster, are these: Waterford would be an excellent situation, but it is an extreme point; it does not form the centre of a district; and unless there were strong controlling motives, which may possibly exist, Clonmell would form a better central point than Waterford. The towns of Tralee and Ennis, the county towns of Kerry and Clare, do not appear to me to be sufficiently large to ensure that constant and permanent attention to which I alluded in the first part of my evidence, as indispensably necessary for the support of the establishments.

Do you mean as to occasional attention and supervision, or general attention and supervision?—I should include both. As to the expense of the establishments, the only datum upon which I can reason with any confidence, is the expense already incurred in the House of Industry and Lunatic Asylum at Clonmell, which, were it appropriated solely to a Lunatic Asylum, so far as my judgment enables me to decide, would be perfectly well adapted for a district establishment on the plan which I have struck out. That building cost about 14,000 *l.* and it is calculated for the accommodation of about 200 persons. According to the information I received both at Cork and Clonmell, I think in the year 1813-14, the expense of each Lunatic, calculated by the head, was 20 *l.* a year; that was assuming heavy rent, and the basis of high prices. If the establishments were free from rent, and a calculation made upon average rates, I should consider that *£*. 18. 5*s.* a year, or 1*s.* a head per diem, would cover every expense of clothing, of support, of the payment of salaries, and all the *et-cæteras* incident to an establishment of this kind. I do not mean by this to include the expense of building, or the expense of repayment of instalments, even if the funds were provided from another source, but merely for the expense of support and maintenance; and that would allow five-pence or sixpence a day for the food of each Lunatic, which is the allowance given by law to prisoners in gaols, as must be known to the Committee. The clothing and the other expenses would be provided by the remaining sixpence; one shilling being the total amount per day for each person.

What do you state the expense per day of the Clonmell Establishment to be?—I stated the expense of the diet for that establishment, for each individual, at five-pence halfpenny per day.

I observe in the statement you have handed in, that the expense of the diet of the Clonmell Establishment for each individual, to be five-pence halfpenny a day; then the shilling a day is to embrace all charges?—Yes, and clothing twice a year; in fact, the whole expense of the establishment, salaries, lodging, &c.

Has any other mode suggested itself to you, of applotting or levying the sum which is necessary to defray the expense of these establishments, than that which you speak of, at the rate of a penny an acre?—There is a great difficulty in this branch of the subject, I am fully aware; but I stated that the districts might be taken at a million and half of acres. Then, only supposing the taxation to be upon a million of acres, there would be half a million of acres thrown in, to relieve the pressure

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pressure upon such portions of the land as are not suited to bear the equal weight of the tax. I should wish to add this observation; having seen a report agreed to by a Committee of your honourable House, during the course of the last year, recommending a new survey and valuation of Ireland, that should such report be acted upon this would be obviated altogether. The difficulty only occurs till such valuation takes place; for if the valuation had taken place, then it would be easy to make the proportion of rate according to the valuation put upon the district. But it struck me, that if you suppose a district establishment containing 200 Lunatics to be supported at the rate of one shilling a head, that would amount to 4,000 *l.* a year, and that sum were to be levied on certain parts of the counties comprehended within that district. I conceive the parts of the counties comprehended in that district, might be rated to this general fund, in the proportion of the average levies, for a certain number of given years. That was what appeared likely to remove the inconvenience incidental to the more natural mode of rating them, according to their population. If you possessed any proof of the wealth of the district, that ought to be the basis of your taxation; but, as matters stand, you should apportion the burthen of each district, rather by viewing the taxation hitherto imposed and hitherto paid, than by looking to the population: that is to say, you would look to the extent of the district, and to the value of it, rather than to any other scale; at present, that suggests itself to my mind. I shall take the liberty of referring the Committee to a paper in my hand, which is an extract of a letter addressed to me from Dr. Hallaran, the physician of the Cork Lunatic Asylum: it has reference to the disadvantage of the establishment of provincial houses for the reception of Lunatics; and with the leave of the Committee I shall read it:

“ I fully agree with you, that any intention of erecting provincial houses for the reception of the Insane, would be attended with many serious disadvantages, amongst which, the great distances between the proposed establishments would be the foremost. Had the members of the Legislature the same opportunities which I have, of witnessing the dreadful miseries invariably incidental to the unfortunate people brought here from the remote districts of our country, their resolution would fail them, and their humanity would rather incline them to recommend that Asylums of this description should even be baronial, if possible, rather than be instrumental to a protracted state of suffering and bodily restraint, which a longer journey must necessarily occasion. The lacerations inflicted on these occasions, are almost incredible, by reason of the means of security which are so generally judged to be indispensable, and which, together with the injudicious treatment, in the way of sustenance on the road, makes it a matter of no small difficulty to the physician to determine between mania and excessive inebriety, or between the mere surgical patient and the victims of some well-earned punishment. It therefore remains too often a question with the friends of those poor people, especially at great distances from Cork, whether the removal shall take place or not; and this cannot be much wondered at, when it has unquestionably happened, that death has frequently, within a few hours after removal, succeeded to the consequence of procrastination, of ignorance, and of barbarous severity.”

This is a statement which, from my own experience, I know to be correct; but, certainly, it comes with much greater weight from the experienced and benevolent physician. The only other point that remains for me to touch upon, relates to the government that might be instituted in these establishments. I should consider that in the spirit of the Richmond Asylum Act, which is the only Act that applies with any degree of skill to the management of Lunatic Asylums, that whenever the establishments take place, a certain number of governors should be appointed by the Lord Lieutenant in council, or other government authorities. I should consider also, that a certain number should be appointed by the grand juries, under whose control the money is levied; and I should consider it quite indispensable, that if even sufficient funds could be provided by the resources I have already mentioned, that the governors should become so by subscription, in order to give them an identity of interest in the success of the establishment; and that physicians of professional eminence should be allowed to visit and control the Institution. But whatever experience I have had of public establishments of this kind, leads me to know, that all systems of control will be ineffectual without some permanent document or record within the establishment itself, which can prove upon inquiry, whether the duties provided for have been performed, and whether the control, even of the governors

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governors themselves, has been properly exercised. Such a record as may furnish, from the information of the individuals in and about the Institution, a mass of knowledge respecting the state and condition of the Lunatic patients confined therein, as would enable the medical world to judge whether the duties of the individuals employed in the establishment, have been faithfully discharged; and in short such a record as may give every information upon the subject. Under this spirit, I have taken the liberty of drawing up a plan of a general registry, which, as I have said, should be kept in every Lunatic Establishment; and according to this plan, the visitors or inspectors would see at one view the names of the patients, their abode, the names of the landlords, references to friends, and their names and abodes, the recommendations of the magistrates, the certificate of physicians, and their names; the date of admission, and the date of the death or discharge of the patient, and the class to which he or she belongs, whether criminal, pauper, or contributing to the expense of the establishment. The Committee will bear in mind, that at present there exists no institution in Ireland for criminal Lunatics; and therefore I think, that an establishment of this kind ought to comprehend this great object, and consequently in the registry, I should propose that reference should be had to the class to which the patient belongs. In the city of Limerick there is no provision for criminal Lunatics, and therefore, for safe custody they are only placed in a more private part of the gaol, which in fact may be said to be nothing more than solitary confinement; there should be also a special registry kept by the physician, giving the names of the patients, their former occupation, their age, whether single or married, whether an old or a recent case, the cause and the character of the disease, the bodily restraint, the medical treatment, and reference to the prescription book, and finally, the result of the case. There should also be a Visitor's Book, in which observations upon all the important points connected with the management and conduct of the institution should be inserted, from which would appear at one view what the conduct of the medical officers had been, the conduct of the servants, the state of cleanliness and ventilation, clothing, food, and bodily restraint. By having such records as these, if there was an inspector appointed by the governors, it would be easily seen in what state the institution was. Had there been such a record as this kept at Limerick, what has been already stated to the Committee never could have occurred; and if such registries should be adopted in the proposed establishments, it never could occur again. *[Here the witness delivered in the following sketches of the registries which he recommended.]*

GENERAL REGISTRY of The LUNATIC ASYLUM.

N ^o	PATIENTS.		Landlord's Name.	Reference to Friends.		Recommendations.		Date of Admission.	Date of Death, or Discharge.	No. in Special Registry.	CLASS.
	Names.	Abode.		Names.	Abode.	Magistrate.	Physician.				
45.	A. B.	&c.									Criminal.
46.	C. D.	&c.									Pauper.
47.	E. F.	&c.									Contributory.

(Signed)

A. B. Steward.
C. D. Matron.

SPECIAL REGISTRY of The LUNATIC ASYLUM.

N ^o .	Patients Names.	Former Description	Age.	Single or Married.	Old or recent Case.	Cause of Disease.	Character of Disease.	Kind of Restraint.	Medical Treatment; reference to Prescription Book	Result of Case.
45.	A. B.	Labourer	33	Single	Recent	Drinking	Mania	Belt 1 May to 16	{ P. 16, 20, } { 59, 61, &c. }	{ Discharged convalescent
46.	C. D.	Mason	22	Married	Recent	Hereditary	Dementia	At liberty	P. 20, &c.	{ Died May 16, 1817.
47.	E. F.	Sailor	40	Single	Old	Hereditary	Melancholia	At liberty	P. 210, &c.	{ Discharged amended, harmless,

July 12, 1816.

(Signed)

A. B. Physician.

LUNATIC ASYLUM.

LUNATIC ASYLUM.—1816.

A. B. Physician,
C. D. Steward,
E. F. Matron.

of

*Thomas Rice,
Esq.*

of such establishments should be provided?—Not absolutely necessary, but certainly desirable.

Do not you conceive that there are also cases of temporary insanity arising from various causes, existing amongst the poor people of large cities and the country adjacent to them, which would be gladly sent, in the hope of a cure, to a neighbouring Asylum, while the friends of the parties would feel the greatest reluctance to send them to any distant receptacle for insanity?—That would, in my mind, depend upon the character which the distant Asylum bore. If the distant Asylum stood high in public repute, I should conceive they would prefer sending them there, rather than sending them to one less esteemed in their immediate vicinity.

Mercurii, 14^o die Maii 1817.

The Right Hon. WILLIAM VESEY FITZGERALD, in the Chair.

The Right Hon. *Denis Browne*, a Member of the Committee; Examined.

*Right Hon.
Denis Browne.*

THE Committee request you will afford them such information, as is in your power, respecting the provisions for pauper Lunatics in the county of Mayo?—I have been for many years advising the gentlemen of my county, to make some provision for poor Lunatics, and my proposition was always opposed on account of the expenses that it was apprehended it would occasion to the county. Soon after we got about 5,000 *l.* the produce of fines levied for illicit distillation. I then, with more effect, was able to get the gentlemen to go with me in the establishment of a Lunatic Asylum. Its expenses were to fall on the fund of the hospital, and we annexed it to the establishment of the hospital. The Charter House School of the county having been given up by the Incorporated Society, I took the consent of the Governor of the hospital for this Charter House, and we were at an expense of about 4 or 500 *l.* on the internal plan and arrangement, as we made about twenty cells. They were convenient in all respects, and very suitable, as far as I could judge, for the purposes of a Lunatic Asylum. I brought down from Dublin a woman who had been employed in the management of lunatics, by the recommendation of the physician, engaged in such care in Dublin. The House was soon filled, and we managed those Lunatics under this woman's direction. She was very well experienced, and very skilful in such management. Two years after she left us; she has now the management of the Richmond Institution.

She has the management of female Lunatics only, I presume?—Both male and female; her name was Mrs. Dogherty; she directed entirely the government and regulation of those Lunatics, according to the plan she had been taught and had learnt in Dublin. We found that the proportion of incurables, out of those that came in to us, was about ten to one, men and women. Those incurables we sent to Dublin, in the care of carriers, at two guineas a-piece; but they treated them in the carriages very brutally. This difficulty, together with the entire refusal of receiving those incurables in Dublin, obliged us to limit very much the reception of such patients into the hospital. Besides, upon examining the place in Dublin where we had sent those Lunatics, on inquiring for them by name, I could find but one woman in the House of Industry, out of about thirty or forty that we had sent up there; and they could give me no account of them, whether they had died, or whether they were cured; and from the whole of that establishment, I conceived it to be much more conducive to increase human misery, than to alleviate or to cure it, I mean the misery of madness. I found in the Richmond Asylum two men whom we had sent up as incurable, one of them was very nearly restored, and was afterwards entirely cured; but the other remained incurable. I consider the first-mentioned place (the House of Industry) extremely unsuitable for the reception or care of Lunatics; and I think the Richmond Asylum very suitable, except that there is not air enough, not space enough for air.

After

After Mrs. Dogherty left us, we put two persons in charge of the Lunatics in the asylum, who had not been so taught the care of Lunatics; but we did not find any great alteration in the number of persons cured, or that failed of cure, by this alteration in the care of them. I did often beg of a physician who attended the hospital to try medicine, which he very seldom would do. He did not seem to me to think that it was by medical treatment this disorder was, generally speaking, to be removed. We now receive no cases but urgent cases of private distress, or such as inconvenience the public; we can't receive a greater number than twenty-four, so that we are confined to cases of particular necessity; if we had no cases to discharge, the hospital would not contain them at all. There is nothing so shocking as madness in the cabin of the peasant, where the man is out labouring in the fields for his bread, and the care of the woman of the house is scarcely sufficient for the attendance on the children. When a strong young man or woman gets the complaint, the only way they have to manage is by making a hole in the floor of the cabin not high enough for the person to stand up in, with a crib over it to prevent his getting up, the hole is about five feet deep, and they give this wretched being his food there, and there he generally dies. Of all human calamity, I know of none equal to this, in the country parts of Ireland which I am acquainted with.

Is your establishment connected with the House of Industry?—Yes, it is.

Then what should you estimate the number of cells at, that would be required, if your establishment were to be extended?—Upon my word I cannot exactly say; I think it would require an addition; but it may be observed, that there are cases where there is less of violence and less of madness. Sometimes we could put two into a cell where they are not very violent; quiet, dull, silent madness.

Suppose fifty Lunatics to come to you annually, and you had no place to discharge those that were incurable to, what accommodation would you require?—I should think fifty cells in the whole.

Have you any doubt that, if some more extensive hospital than that one now attached to your House of Industry, were established in your county, it would be better calculated for the cure of Lunatics?—Most certainly; I think such an establishment is wanted as we thought we had in Dublin.

What were the expenses of the construction of this inadequate Asylum?—We took it at a rent of 60 *l.* per annum, and we laid out about 500 *l.* in altering it. But we have also made it a House of Industry, and I calculate that 500 *l.* to apply to both.

What is the annual income presented by the county for its support?—We do not present any thing for it.

Then how is it supported? Is there any particular provision presented for the Asylum?—I think not; but the county pays the physician, and pays the part of it that is the Bridewell.

Is it the same physician who has the superintendence of the County Infirmary?—It is.

Can you inform the Committee what care and attendance he affords the Lunatic patients?—I suppose he is there, he ought to be there. If he neglected it, and I knew it, I should not be pleased, and I should think he neglected his duty.

In the event of its being recommended to Parliament to establish provincial Asylums, what place in the province of Connaught, should you think the most suitable for such an establishment?—I think it must be some point which is central between the counties of Sligo, Mayo, Roscommon, and Leitrim.

With reference to any places that you may have thought of, state any that you think fit for such a purpose?—I think the barrack of Clinoni, which is now unoccupied by troops, would be a commodious erection for the purpose.

Can you state to the Committee what the amount of the sums for the support of the House of Industry, and the Lunatic Infirmary was, previous to the expenses being defrayed by the fines exacted for illicit distillation?—Before those fines were levied we had no Lunatic Asylum at all.

Then what provision was there for Lunatics?—By the gaol law there was to be a certain number of Lunatic cells annexed to every county gaol.

But that was for the custody of convict Lunatics?—No. As I understand the law, it was for Lunatics generally. They could be committed there by any two magistrates.

When you speak of the manner in which the Lunatics are treated in the House of Industry in Dublin, do you make any reference to the means?—Certainly; they complained to me that the means were inadequate; For example, I saw twenty beds in

*Right Hon.
Denis Browne.*

in one line for these unfortunate people, and in those beds they were eating. I know that noise is the most terrible and destructive thing in cases of madness, and yet some of these wretched people were screeching in such a way, that sleep to others was impossible. It was utterly impossible that they could have rest, which is the most necessary thing for them. It was one scene of dirt, of noise, of confusion, of madness, and every thing that was abominable. I should think it was a place more calculated to occasion madness than to cure it. The keepers complained to me "we have not room enough; we have often stated that to the Government, and it is not our fault; we cannot help it."

You had no reason to doubt this?—No; I think that the place was not one-sixth part large enough—not one-tenth part large enough.

Are you aware that they were compelled by law to receive all patients that were transmitted to them from all parts?—Yes, I am.

Are you also aware, that with a view to relieve this pressure, a very large institution, the Richmond Institution, has been built at an immense expense by the Government?—Yes; and I had great satisfaction in examining that establishment; I saw all the comfort that the situation would admit, except room enough for air and exercise.

Then the Committee are to understand that it is your opinion that the establishments now existing in the different counties in Ireland, are inadequate to the reception of the Lunatic paupers, and that some provision of a more extensive nature should be made for them?—I know it to be so in my own county, and I believe it to be so in Ireland generally.

James Daly, Esq. a Member of the Committee; Examined.

*James Daly,
Esq.*

CAN you inform the Committee what provision exists in the county of Galway for Lunatic paupers?—None; any patients that I have known, it was necessary for them to be sent to Dublin.

The Right Honourable *John Maxwell Barry*, a Member of the Committee; Examined.

*Right Hon.
John M. Barry.*

CAN you inform the Committee what provision there is made in the county of Cavan, for pauper Lunatics?—None.

What has suggested itself to you as best calculated for a provision for the pauper Lunatics in Ireland, generally?—I certainly think District Asylums the best. The reason I should prefer them to provincial ones is, that the establishments for pauper Lunatics at present in existence, must render their being established provincially inconvenient.

What place would you propose as the most convenient for the erection of a Lunatic Asylum, in your county?—I should think Enniskillen.

The Right Hon. *Maurice Fitzgerald*, a Member of the Committee; Examined.

*Right Hon.
M. Fitzgerald.*

WHAT establishment have you in the county of Kerry, of the same nature as the establishments of which we are inquiring?—None for Lunatics; no means of accommodating them in that county.

What have you done with patients in your county, as have been afflicted with lunacy?—I am not aware of any application to any public body.

Would an Asylum at Limerick be convenient, in point of situation, for the receipt of patients from the county of Kerry?—For about half the county.

And what place then would you propose, as the most convenient, generally, for the South-western part of Ireland?—A division for the county of Kerry, Limerick and Cork, would be most suitable, if we have not a county establishment.

The Right Honourable *Augustine Fitzgerald*, a Member of the Committee; Examined.

*Right Hon.
A. Fitzgerald.*

WHAT accommodation is there in the county of Clare, for pauper Lunatics?—There is a house, consisting of seven cells, adjoining to the House of Industry, together with a room for convalescent patients, which I deem totally inadequate for the number of pauper Lunatics that have been sent there at different periods.

Don't

Don't you think that a general Asylum, formed in Limerick, would be, in point of fact, convenient for the reception of patients, in the county of Clare?—Most undoubtedly I do.

Do you not think that it would be preferable, in point of expense, for the latter county to contribute to an Asylum at Limerick, rather than to have the separate expense of a sufficient establishment at Ennis?—I do.

Are you of the same opinion with respect to the medical superintendence and government of such an institution?—Yes, I am, certainly.

LIST OF APPENDIX.

- Nº 1.—Copy of a Letter from the Physician and Surgeon Generals, and Director General of Hospitals, to the Right Honourable Robert Peel; dated Army Medical Office, 8th October 1816 - - - - - p. 26
- Nº 2.—Papers delivered in to the Committee by the Right Honourable Robert Peel, 25th March 1817; John Leslie Foster, Esq. 6th May 1817; and Thomas Rice, Esq. 7th May 1817 - - - - - p. 29
- Nº 3.—Copy of a Letter from Mr. James Cleghorn, of *Saint Patrick's* or *Swift's* Hospital, giving some Account of the Hospital, dated 17th March 1817; with a Resolution of the Committee of Governors, 26th November 1810 - - - - - p. 45

APPENDIX.

Appendix, N° 1.

COPY OF A LETTER from the Physician and Surgeon Generals, and Director General of Hospitals, to the Right Honourable Robert Peel; dated Army Medical Office, 8th October 1816.

To the Right Honourable Robert Peel, M. P. &c. &c. &c.

Sir,

Army Medical Office, Dublin, 8th October 1816.

A DAY or two subsequent to the receipt of your letter of the 18th of September and enclosures (now returned,) we had a meeting with the Governors of the House of Industry at their board room; and after conversing at some length on the business to which said letter relates, it was agreed that a detailed report should be transmitted to us by the Governors, on the situation and management of the Lunatic department more immediately attached to the House of Industry, as it was conceived that the possession of such a document would facilitate the investigation which the Government had directed us to make.

After a careful perusal of said report, (herewith enclosed, marked No. 1.) we visited the entire of the Lunatic paupers now in the House of Industry, amounting to 57 males and 133 females, few or none of which may be considered as curable patients; and minutely examined into the accommodation provided for this description of sick poor, on which we shall submit a few remarks for the consideration of his Excellency the Lord Lieutenant, under the heads of,

1. Dietary.
2. Accommodation in wards and cells and airing ground.
3. Clothing, bedding, and attendance by nurses and keepers; and,
4. Medical care.

On the first head we beg leave to refer to a Report from the two senior physicians of the House of Industry, dated 26th Sept. 1816, (herewith transmitted, marked, No. 2.) which contains two forms of dietary, one for the Lunatics and Idiots in the paupers buildings, and another for the Lunatics in the Hardwicke cells and wards: both of these dietaries appear to us to be judiciously formed, and amply sufficient for every necessary purpose; and the result of a careful inquiry lately made into this branch of the subject at the House of Industry, induces us to concur in the opinion delivered by the physicians in said Report, "That the whole of the diet thus supplied has been of excellent quality." Some faults may indeed be found with the manner in which the food has been served to the Lunatic patients, but these faults are in a great measure to be ascribed to the crowded and defective state of the present accommodation.

In entering upon the consideration of the second head, namely, the nature and extent of the accommodation heretofore provided for Lunatic patients and Idiots in the wards of the paupers buildings of the House of Industry, and in those contiguous to the Hardwicke cells; we cannot refrain from expressing regret and surprise, that Lunatics and Idiots of all ages and descriptions, as to severity of disease, should have been, for many years past, promiscuously huddled together in the same apartments, and even placed frequently in the same beds with helpless paupers of a sane mind, whilst a crowd of female Lunatics and Idiots has been dispersed indiscriminately amongst the paupers wards, to the utter destruction of all decency and moral feeling throughout the entire establishment. A charity thus constituted, instead of being a benefit, is a real nuisance in the country; and if it cannot be worked in a better manner, in ought, in our humble judgment, to be abandoned altogether. In using this strong language, we do not wish to press hard upon the characters of respectable men who have long toiled through a painful and laborious public employment, with very many serious difficulties to struggle against, and who have to our knowledge repeatedly made urgent representations to the chief governors of Ireland upon this very subject; but it is our wish and intention, in the present letter, to impress on the enlightened and benevolent mind of his Excellency the Lord Lieutenant, that although a great deal of good has been done, and a great deal of misery relieved, by the formation of the Richmond Lunatic Asylum, a great deal more still remains to be accomplished, before the pauper lunatics in the House of Industry are placed in that situation which their unhappy condition so urgently demands.

With respect to the Hardwicke cells, in number fifty, (ten of which are in a state of decay, and containing at present 22 male and 29 female Lunatics, who require confinement, with occasional coercion; we think they are well constructed, and with a trifling alteration, well suited

sued to answer their intended purpose; and though the adjoining yards, for air and exercise, are small and confined on all sides, and justify the observations made by the Right Honourable Denis Browne on that particular subject; we are not without hopes that such additions may be made to those buildings and yards, at a moderate expense, as may in some degree remove the evils complained of, and render the whole an useful appendage to the establishment at large.

We shall comprise what we have to say on the clothing, bedding, and attendance on the incurable lunatics by the nurses and keepers of the House of Industry, by observing very briefly, that the remedies we have to propose on these several matters, are so obvious and so closely connected with a better and more enlarged accommodation of wards and cells, that they necessarily must go hand in hand with any plan of permanent improvement which shall be adopted; as it must form an essential part of every such plan to introduce order and cleanliness throughout the whole of the establishment, as well as to provide decent and suitable comforts for this class of patients.

On the fourth and last head, namely, the medical care of the above paupers, which the Governors of the House of Industry have placed in the hands of the two senior physicians, aided in certain cases by the junior physician, we are happy to bear testimony to the zeal, diligence, and ability manifested by these officers in the discharge of every part of their duty, which plainly appears upon the face of their able and satisfactory Report, to which we beg leave particularly to refer, and which, in our opinion, not only exculpates them completely from the most remote suspicion of professional inattention, but proves them to be men actuated by the best principles, and who take a warm interest in the relief of that class of persons entrusted to their care.

We shall now submit, for his Excellency's consideration, a few observations on the remedial part of the present interesting subject, and these, we think, may be conveniently comprised under two distinct heads:—

First, Such additions and improvements as are called for in Dublin to render the lunatic department of the House of Industry sufficiently capacious for the comfortable accommodation of its present inmates; taking likewise into consideration the probable increase which may be expected to take place in this class of paupers in the capital for some years to come; and,

Secondly, If any, and what measures are required for the care and relief of lunatic paupers in the other parts of Ireland.

We hardly think it necessary to say one word in addition to what is already contained in this letter, in proof of the inadequacy of the lunatic accommodation at the House of Industry to meet the present pressure; we have felt the difficulty to be, to propose an effectual measure for the above purpose, which could be cheaply and expeditiously executed. In the progress of our inquiries, we directed our attention to the penitentiaries for male and female prisoners in Smithfield, in the hope that they might be resigned, and fitted up at a small expense as asylums for male and female lunatics; but the inquiries which have been made by the Governors of the House of Industry, the senior physicians, and architect, have satisfied us that these buildings were too far removed from the House of Industry, and otherwise objectionable as to site and internal structure. In this situation Mr. Johnson has made two proposals in his letter addressed to Doctor Renny, and dated 4th of October 1816, the latter of which we are inclined to prefer to the former; the object of which is, to add twenty rooms or cells to the Hardwicke Lunatic Hospital, along the Brunswick-street range, thereby increasing its accommodation for sixty instead of forty maniacs, and to provide for sixty more patients of that description, in the first and second stories of the western range of the old square of the House of Industry, still keeping the upper floor of said building for ninety-six idiots. The yards to accommodate the maniacs, to be had at the rear of the building, by reducing the cart-way between the wall of the Richmond Lunatic Asylum and the House of Industry from 25 to 20 feet wide, which would increase the size of these yards to about 136 feet by 25 feet each. The probable expense of this plan is stated at £.3,562, exclusive of beds, bedding, and furniture, estimated at about £.1,000. more—See Paper No. 3. And it might perhaps smooth a financial difficulty to state a fact which, as Governors of the Richmond Lunatic Asylum, falls within our knowledge, that a saving of some thousand pounds will be made in the estimate voted in the last Session of Parliament, for completing and furnishing the above institution, in consequence of a judicious alteration adopted by the Governors in the size and situation of the wards for male and female convalescent lunatics, which saving cannot, in our opinion, be appropriated to a better purpose.

Should such a measure be carried into execution, under the sanction of Government, the whole of the pauper Lunatic Establishment adjoining to Brunswick-street, will consist of two distinct parts, viz.—The Richmond Lunatic Asylum to contain 250 patients, with 176 attached to the House of Industry; the former institution to be considered as a curative hospital, and the latter as a depot for incurables, as, with all deference to the opinions of the highly respectable physicians of the House of Industry, we must observe, that the most judicious administration of medicine forms but a small part of the relief to be afforded to curable lunatics, it having been established by a host of testimony, that proper accommodation, good air, and extensive ground for exercise, with a steady and temperate enforcement of moral government, constitute the principal sources from which either temporary or permanent relief may be expected in a majority of these melancholy cases; and when the government of the country has gone to great expense to build such an asylum, and to place it under adequate control, it is most reasonable that the lunatic pauper capable of being relieved or cured, should have the full benefit of an institution so formed,

in preference to being placed where the above advantages cannot possibly be enjoyed to the same extent. And we avail ourselves of this opportunity of setting a right honourable gentleman right in a remark made in his letter addressed to you, and dated 7th September 1816, as to the limited space for exercise in the Richmond Asylum, as he was not aware that when the wings for convalescent patients in that building (now in progress) are finished, the whole ground in the front will be surrounded by a wall, which will give 13,000 square yards for the above purpose, for the use of the male convalescents, whilst a space of 10,133 square yards, in the rear of the asylum, will be appropriated to the use of recovering females, and besides the above yards, there are eight inclosed courts for the separate classes of maniacal patients, averaging about 1,000 square yards each.—See Paper, No. 4.

Should his Excellency think proper to act upon the suggestions contained in this Letter, there are reasonable grounds for believing that many of the evils now heavily felt in the Lunatic department of the House of Industry will be alleviated; at the same time we think it is of great importance to remark, that the remedy so applied will be merely temporary, unless effectual measures be taken to limit the number of insane persons constantly resorting to Dublin for shelter and relief. The force of the above observation will appear in a striking manner when we look to Return No. 5, by which it is shown that the number of Lunatics now in the Richmond Asylum, as to whom there is even a hope of permanent relief or cure, the disease not being of more than one year's standing, amounts to sixty-eight, whilst there are one hundred and twenty-nine incurable lunatics in said Asylum, who must occasionally be transferred to the House of Industry, to make room for curable cases as they occur.

It further appears by the Physician's Report, that one thousand one hundred and seventy nine lunatics and idiots have been admitted into the House of Industry during the last five years, of whom four hundred and twenty-five were supposed to come from the county and city of Dublin, and seven hundred and fifty-four from the other counties of Ireland, (see Return No. 6,) making an average of two hundred and thirty five admissions annually. Besides this, a rumour has gone abroad, and is very generally believed, that buildings have been lately erected in Dublin for the reception of insane persons on so extensive a scale as to be able to accommodate the whole of these unhappy persons wandering over the face of the country, and inmates in gaols and hospitals, it cannot therefore admit of the smallest doubt, that if some humane and well considered measures be not speedily adopted by Government, these miserable objects will accumulate in the capital, so as to disturb and disorganize every arrangement that has heretofore been made in this department of charity. To ward off so heavy a calamity, we think that two measures ought to be adopted without delay: 1st, To enlarge the existing Lunatic establishment in Cork, and to form a similar establishment in Belfast, to contain from one hundred to one hundred and fifty patients, as proposed in a letter addressed to you by the Governors of the Richmond Lunatic Asylum, dated 20th of November 1815, a copy of which letter is enclosed (marked No. 7.); and, 2ndly, to annex twelve additional Lunatic cells to each of the County Hospitals, and double that number in the large counties of Ireland. This would at once form an accommodation for more than five hundred Lunatics, all of whom would be placed under the care of experienced professional men; and it would be no difficult matter to devise such an arrangement as would give complete security and assistance to the unfortunate sufferers, and prevent their transfer from one county to another, or to Dublin, from gaols, &c. &c. as long as there was a cell to dispose of at any of these Hospitals.

We think that this last measure might be promptly and cheaply executed, the expense of erecting the cells and of maintaining the patients, to be assessed upon each county respectively; it being consonant to every rule of justice that it should fall upon that part of the community more immediately connected with those who enjoyed the benefit.

We conclude by observing, that this letter has been drawn out into greater length than we at first intended; but if we had said less, we should not have satisfied our own judgment. We have many thanks to return to you for the polite and flattering manner in which you have been pleased to communicate to us the sentiments of the Lord Lieutenant on the foregoing occasion, and we feel that the best return we could make for such condescension was, to deliver our sentiments with that entire frankness and impartiality which it behoves every public man to adopt when he addresses his Excellency on a subject of great national interest.

We have the honour to be, Sir, with great respect,

Your most obedient humble servants,

(Signed)

{ W. Harvey,
G. Renny,
Philip Crampton.

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Appendix, N° 2.

PAPERS delivered in to the Committee by the Right Honourable Robert Peel, 25th March 1817; John Leslie Foster, Esq. 6th May 1817; and Thomas Rice, Esq. 7th May 1817.

To the Right Honourable Robert Peel, &c. &c. &c.

Sir,

Dublin, 20th November 1815.

I AM directed by the Governors of the Richmond Lunatic Asylum to state to you, for the information of his Excellency the Lord Lieutenant, that they have had several meetings at the Asylum, and made some progress in forming such arrangements as appeared to them to be requisite at the commencement of the duties which they had undertaken to execute; and although the time and attention which have been bestowed on these objects have as yet perhaps been too short and limited, to make the Governors to take such a correct and comprehensive view of this public charity and its several bearings, as its importance requires; still, the facts which have been before them in consequence of local inquiry, as well as those which have been collected from the perusal of several publications of character and authority, in the cure and management of insane persons, warrant them to submit an outline as to the future extent of this Institution, and its necessary connection with the great Pauper Establishment of the county, which for obvious reasons they think it right to bring before the notice of Government without loss of time.

The objects which pressed upon the early attention of the Governors were, the speedy and complete finishing and furnishing of the Asylum and the several offices connected thereto, in order that the whole of the building, forming an accommodation for two hundred patients or thereabouts, might be appropriated with as much expedition as possible to the relief of the House of Industry. To accomplish this purpose, a kitchen, scullery, hot and cold baths, waterclosets, fitting up and furnishing rooms for housekeeper's apartments, secretary's office and store rooms, all conveniently placed, and on an approved construction, were ordered to be proceeded on, the entire of which works may be expected to be executed in six or eight months from this day; and the expense of which, amounting to five thousand six hundred and twenty-five pounds, have been included in estimate No. 1, herewith enclosed.

Estimate No. 2. includes the probable expense of furnishing the Asylum in a suitable manner, with beds and bedding for patients, keepers and nurses, culinary utensils, clothing, and vessels for serving food to patients, strait waistcoats and other contrivances for restraint and coercion, amounting to £.2,656. 19s. 6d.

Estimate No. 3. amounting to £.12,733. 15s. includes the expense of erecting a new building for the accommodation of the resident master and fifty convalescent patients, which, conformable to the enclosed plan, the Governors propose to place on the western side of the ground, in the front of the Asylum; conceiving that a building of this nature constitutes a most essential part of every Lunatic Establishment, inasmuch as it affords an opportunity of carrying into effect the moral discriminating plan of treatment, the efficiency of which, in every case of curable lunacy, as opposed to the system of an obdurate and severe coercion, has been established on a basis which in these enlightened times will not easily be shaken or departed from under humane and conscientious management.

The foregoing observations have been made on the supposition that the Government of Ireland intended the Richmond Lunatic Asylum as an institution principally for the reception of curable Lunatics; and the Governors conceive that accommodation for two hundred and fifty patients would be found sufficient for all the insane paupers at present in the House of Industry of whose recovery any hopes can be entertained. But they feel it their duty to direct the particular attention of Government to the melancholy consideration that there will still remain not less than one hundred and seventy patients incurably insane pressing as heretofore upon the House of Industry, who cannot, and who ought not in any view which can be taken of their unhappy and necessitous situation, be refused admission into that charity.

When to this heavy and afflicting assemblage of poverty and disease is added the number of patients that will from time to time be sent from the Richmond Asylum into the House of Industry as hopeless cases, it is very evident that the present plan will fail to afford any great or effectual relief, unless the Governors of the House of Industry are provided with a suitable and commodious building, to contain at least from two to three hundred patients of the last-mentioned description. Such a provision appears to the Governors of the Asylum to be indispensably necessary, not only as affording means of safe confinement, and of relief to incurable Maniacs and Idiots, but more especially to the comfort and accommodation of the aged, necessitous, and impotent, who have sought a voluntary asylum in the House of Industry, many of whom have filled respectable stations in society. To disturb and incommode persons of this description by the outrages and annoyance of the insane must be revolting to every feeling of decent and charitable management.

It is further to be observed, that in addition to the accommodation proposed to be provided for the lunatic paupers in Dublin, the most satisfactory results would, in the opinion

of the Governors, follow, if the Government was pleased to go a step further, it being quite obvious that the relief of the above disease can neither be fully nor conveniently met by lunatic establishments confined to the capital.

With this impression on the minds of the Governors, they think that the enlargement of the existing Lunatic Hospital in Cork, and the formation of a similar institution in Belfast, to contain one hundred and fifty patients, might be adopted with advantage, as in those cities it would not be difficult to procure a sufficient number of intelligent and benevolent Governors to serve without fee or reward; subject to such a general system of future inspection and control, as the legislature and the Government of Ireland shall in their wisdom think fit to establish.

These several matters are respectfully submitted by the Governors to the consideration of his Excellency the Lord Lieutenant, under a full conviction that unless the remedy about to be applied shall meet the urgency of the disease, in all its stages, and to the full extent, the benevolent intentions of his Excellency will in a great measure be defeated, and the public at large disappointed in the result of the general measure.

I have, &c.

(Signed) *W. Wainright*, Secretary to the Governors,
Richmond Lunatic Asylum.

At a Special Meeting of the Governors of the Richmond Lunatic Asylum, holden at the Asylum, on Tuesday the 15th of April 1817, for the purpose of taking into consideration a Communication from Mr. Leslie Foster.

Present:—Edward Houghton, esq. in the Chair; Doctor Harvey; Doctor Percival; Francis Lestrangle, esq.; Rev. William O'Connor; Peter Latouche, jun. esq.; James Henthorn, esq.; Rev. James Horner.

Resolved,

THAT the successful treatment of the insane depending more upon the adoption of a regular system of moral treatment than upon casual medical prescription, it is the opinion of this board, that the only mode of effectual relief will be an establishment of District Asylums, exclusively appropriated to their reception; and that any addition made to county hospitals will be inadequate to the purpose, and in many points of view highly exceptionable: By establishing these asylums in the neighbourhood of populous cities, an efficient superintendence would be more easily procured.

A regular correspondence ought to be maintained between the governors of the district Asylums and those of the Lunatic Asylum in Dublin, who, by having immediate communication with government, and having had experience of the management of a very extensive institution, might assist in forming plans of the buildings, and laying down general regulations. By means of this correspondence, essential improvements might be made in this so useful department of medical science, besides the existing lunatic establishments, which might be enlarged, and subjected to the general system of regulation and inspection, so as to afford accommodation for the insane of Leinster and Munster. It is proposed that new asylums be erected in the provinces of Ulster and Connaught, according to the plan annexed, capable of being added to as future exigencies may arise.

The benefit of the General Lunatic Establishment for Ireland might be much extended, and its expense diminished, by admitting to the asylums patients who might contribute to its support, by the payment of a moderate annual stipend. The governors of the Richmond Lunatic Asylum had such a measure in contemplation, but had hitherto been prevented from adopting it, in consequence of the great number of paupers who are continually recommended for admission, and who completely occupy the asylum.

New District Asylums proposed to be established:

- One at Athlone, for Connaught,
- One at Belfast or Armagh, for Ulster,
- One at Derry.

Each to contain from one hundred to two hundred patients, with an area of not less than ten acres of ground annexed.

W. Wainright, Secretary.

John Leslie Foster, esq. M. P. &c. &c. 7, Arlington-street, London.

Sir,

House of Industry, April 8, 1817.

I AM directed by the governors of the House of Industry, to acquaint you that having seen a letter which you were pleased to write to the secretary of the Richmond Lunatic Asylum, requesting information respecting "the best means of relieving the pressure upon
" Dublin,

“ Dublin, by the formation of lunatic asylums in the country ;”—I am desired to inform you that a board will be held on Friday next, at the Richmond Lunatic Asylum, when your letter will be taken into consideration ; and of course, the governors of that establishment will fully report their opinion on the subject. But, as the governors of the House of Industry are naturally interested in any thing which may tend to the amelioration of the state of the poor, they hope you will pardon them in offering a few facts upon the subject, which their local experience has enabled them to give.

In consequence of the influx of poor of every description, particularly lunatics, from all parts of Ireland to the House of Industry, the governors took the liberty, in December 1815, of submitting their opinion, that the only practical remedy which occurred to them, as likely to remove the pressure on Dublin, was the enlargement of the existing establishments for their relief ; and that an experiment might be advantageously made by the extension, either of some of the County Hospitals or of the Houses of Industry in Cork, Belfast, Waterford, and Limerick.

That by these means the influx of lunatics to Dublin would be considerably diminished, as it is a fact, that a great majority of the inmates of the House of Industry have emigrated from the provinces of Ulster and Connaught : as illustrative of this, they beg leave to submit an account of the number of lunatics admitted into the House of Industry for five years to 1816 ;—viz.

From Connaught	-	-	-	161
Leinster	-	-	-	645
Munster	-	-	-	253
Ulster	-	-	-	91
Great Britain	-	-	-	29
Total	-	-	-	<u>1,179</u>

which shows that nearly double the number admitted from the county and city of Dublin have been received from the country parts of Ireland.

I am also desired to enclose a general Report of the House of Industry for the last year, as in some degree relating to the subject of your inquiry, and to state to you, that forty additional cells are now erecting for the reception of lunatics ; but that no lunatic is to be hereafter admitted into this establishment, except such as may be transmitted from the Richmond Lunatic Asylum as incurable.

I am desired to express the anxious wish of the governors to give every aid in their power to your benevolent and most important undertaking, and their readiness to afford you any assistance or suggestion which they may be enabled to offer, or you may be pleased to require from them.

I have the honour to be, Sir,

Your most obedient humble servant,

W. Abbott, First Clerk.

THE Limerick House of Industry comprehends four *distinct establishments*: it is not only an asylum for paupers and vagrants, but a nursery-school for deserted children, a Lock Hospital, and a retreat for Lunatics. The presentments annually made are of £.600, under the Act of 1771, and ought in strictness to be appropriated to the support of the House of Industry only.

The general views of the Committee have been impeded by many untoward circumstances ; a want of funds was a fatal obstacle to any vigorous improvement ; a general system of neglect pervading many branches of the Establishment, had created bad habits, impossible at once to subdue, practices the most profligate had prevailed in the house, and one of the officers of the Establishment had been implicated in the most aggravated criminality. The house seemed rather to be a seminary of vice than a school of reform. A total want of classification prevailed, idiots and convalescent lunatics were left in immediate intercourse with the sane ; males and females, young and old, infirm and criminal, sick and healthy, are united in the same Establishment. Even in cases of infectious fevers no ward is provided in which the proper medical treatment can be attended to.—First Report.

There are at this day 255 persons in the house, of which fifty-eight are infirm and sick, forty-four lunatics and seventy-seven children. The lunatic department consists of thirteen cells, in which nineteen unhappy creatures are confined, and whose covering is five pairs and a half of blankets, and one pair of sheets. There are 106 beds in the different wards, sixteen of which are occupied by single persons, whose infirmity renders it inadmissible that a second person should be with them, leaving ninety beds for the accommodation of 220 persons ; the inmates are subsisted at the expense of 2½ d. a head.

If speedy aid be not afforded, the regulating Committee will be under the painful necessity of discharging part of the present wretched inmates, and leaving them exposed to the aggravated calamities of this inclement season.

January 1807.

Sir,

Waterford, 25th December 1816,

IN obedience to your letter, I set on foot such inquiry as I thought best suited to answer the object of it; and I now enclose a document which I hope will be found satisfactory, respecting the only establishment for the county of Waterford, for the reception of pauper lunatics.

I have the honour to be, with great respect,

Your most obedient humble Servant,

Sam. Roberts.

To the Right honourable Robert Peel.

Sir,

Waterford, 27th December 1816.

I RECEIVED your letter on the subject of the Asylum appropriated for the reception of lunatics; and in reply beg to state I applied to the Committee, who I believe meet every Monday to regulate matters relative to that institution, as being the most correct source to obtain the information you desired, and was informed, that the necessary report would be made to you through the medium of Samuel Roberts, esquire, the Treasurer for the county, who it appears laid a letter before them similar to mine, and as mine could only be the echo of his, probably you would dispense with it; but if a letter from me would give the least satisfaction, I will most freely give it.

I remain, Sir, in haste,

Your very obedient humble Servant,

James Alcock.

To William Gregory, Esquire, &c. &c. &c.

Sir,

Richmond Lunatic Asylum, 18th April 1817.

IN compliance with your letter of the 3d instant, enclosing an order of the Committee of the House of Commons on Irish pauper lunatics, requiring a copy of the registry of the Richmond Lunatic Asylum; I have the honour to forward you a copy and duplicate thereof, from the commencement to the 12th instant.

I beg leave, however, in order to explain the irregular appearance of the registry for some time after its commencement, to state that previous to my appointment to the office which I now hold, and which occurred in February 1816, there had not been any registry whatever kept here of the admission and discharge of patients, and that the only document which I could obtain, to compile the present registry, from the time the Asylum was first occupied, (in February 1814) until that date, was an extract from the registry of the House of Industry: this extract only stated the name, age, religion and date of transmission of the patients from that institution to this; the other particulars I have been able in some few instances to supply from the patients themselves, or from friends who occasionally came to visit them. It is also necessary to mention that the present form of affidavit and certificate necessary for the admission of patients, and which in a great measure ensures all the necessary information required for the registry, was only concluded upon and ordered by the Board of Governors in April 1816.

I have the honour to be, Sir,

Your faithful humble Servant,

(Signed) *Richard Grace*, Moral Governor,

Richmond Lunatic Asylum.

AN ACCOUNT of the number of Lunatics and Idiots admitted into the House of Industry in the last five Years.

YEARS.	From the County and City of Dublin.	From the Country at large.	TOTAL.
1811.	85	130	215
1812.	75	152	227
1813.	87	132	219
1814.	94	178	272
1815.	84	162	246
	425	754	1,179

Average number from County and City of Dublin - 85

Ditto - - ditto - - from the Country at large - - 151

House of Industry,
October 4th, 1816.

ABSTRACT OF REPORTS from the Treasurers of the several Counties and Cities in *Ireland*, called for by the Irish Government, in December 1816; as to LUNATIC ASYLUMS.

SUBSTANCE of Communications made to the Right honourable Robert Peel, from the Treasurers of the several Counties and Cities in Ireland, in reply to a circular Letter addressed to them by the Lord Lieutenant's command, on the 17th December 1816; calling upon them respectively to report to him, for His Excellency's information,—Whether there is any establishment in the County or City of ———— for the reception of pauper Lunatics, with the nature and extent of such establishment, if any; the number which it accommodates; the provision made for the diet and medical attendance of the patients; and from what funds the expense of the establishment is defrayed; viz.

County of *Antrim*:—No establishment for the reception of pauper Lunatics.

- - - *Armagh*:—No establishment; much wanted.

- - - *Carlow*:—No establishment.

- - - the town of *Carrickfergus*:—No establishment.

- - - *Cavan*:—No establishment.

- - - *Clare*:—An asylum containing seven cells, each containing one lunatic, two rooms above the cells for convalescents, each capable of accommodating four or five patients; present establishment, seven lunatics and four convalescents; presentment made for their food and keeper's salary. Medicine from County Infirmary; surgeon who attends has no recompense.

County and City of *Cork*:—An asylum erected 1788, with enlargements since, capable of receiving 250 persons; at present it contains 224; funds by presentment.—See the Treasurer's letter annexed, (No. 1.) with Enclosure.

County of *Donegal*:—A house in the town of Lifford, considered as an appendage to the gaol, capable of accommodating sixteen patients, always full, and many patients recommended for each vacancy; expenses about £.200 per annum, supported partly by presentment and partly from funds belonging to the County Infirmary; patients poorly accommodated, no fire but in the keeper's kitchen, which is represented as a wretched place, from an uncleansed sewer, and not capable of containing sixteen persons.

County of *Down*:—No establishment; some years since the grand jury presented a sum of £.288 towards the building of a lunatic ward; but the work not having been proceeded upon, and no subsequent presentment having been made, the said sum so presented was afterwards applied in aid of the county.

County of the Town of *Drogheda*:—No establishment for pauper lunatics.

County of *Dublin*:—No establishment returned by the treasurer.

County of *Fermanagh*:—No establishment.

- - - - *Galway*:—No establishment.

- - - - *Galway* (Town):—No establishment; a private dispensary, kept at the individual expense of the honourable William Le Poer French. It does not appear from the treasurer's letter that lunatics are there received.

County of *Kerry*:—No establishment; much wanted.

County of *Kildare*:—No establishment.

County and City of *Kilkenny*:—A few cells building on a part of the ground attached to the House of Industry, by a presentment of £. 985.

9 lunatics are confined in the county gaol } But are not separated from the other
3 - D^o - - - - the city gaol; } prisoners, except when violent, they are
then confined in the cells in which they sleep.

10 - D^o - - - - in the House of Industry. There is no separation from the
other persons confined there, and they are treated in every respect in
22 the same manner.—See the Treasurer's letter annexed, (No. 2,) with
enclosures.

King's County:—No establishment.

County of *Leitrim*:—No establishment.

County of *Limerick*:—No establishment. The treasurer adds that "any Lunatic is confined in the House of Industry when the funds of that establishment will admit of it."—(See the following report from the city treasurer.)

City of *Limerick*:—Thirteen cells attached to the House of Industry; twenty-six women and eighteen men, insane and idiots, in that institution; a physician attends gratis; funds by presentment on the County and County of the City, aided by a few subscriptions.

County and City of *Londonderry*:—Twelve cells in the building connected with the County Infirmary, (now all occupied;) funds by presentment, aided by a few subscriptions.

County of *Longford*:—No establishment.

County of *Louth*:—No establishment. "Not even a ward in County Hospital." Lunatics are sometimes committed to the care of the gaoler, until application is made to the House of Industry, or Swift's Hospital, in Dublin, to receive them, when they are sent to Dublin.

County of *Mayo*:—Eighteen cells in the Bridewell, some large enough to contain two beds; eight lunatics now confined there; funds by presentment from gaol fund; hitherto the patients, after being confined twelve months, have been sent to the House of Industry, Dublin; but that asylum being now full, will receive no more.

County of *Meath*:—No establishment.

County of *Monaghan*:—No establishment.

Queen's County:—No establishment.

County of *Roscommon*:—No establishment.

County of *Sligo*:—No establishment. Lunatics occasionally lodged in the county gaol; an instance of a murder committed by one lunatic on another confined in the same cell; one lunatic now in the gaol, but not separately confined.

County of *Tipperary*:—Establishment at Clonmell, annexed to the House of Industry; funds about £. 1,400 per annum by presentment, contains about forty men and women; now therein thirty-one.—See the Treasurer's letter annexed, No. 3. with Enclosures.

County of *Tyrone*:—Last year (1816) four wards had been appropriated for pauper Lunatics, in the new buildings added to the gaol; funds to be presented; to be attended by the surgeon to the gaol; laments "that the pauper Lunatics who have been committed to the gaol as nuisances, are so miserably neglected, and ill provided with every common necessary, as makes it shocking to human nature to witness."

County and City of *Waterford*:—Part of the House of Industry is occupied by pauper Lunatics, forty-four in number; there are sixteen solitary apartments; the Lunatics not confined in these, are lodged in the wards, not separated from the vagrants and idiots; funds by presentment.—See Treasurer's letter annexed, (No. 4.) with Enclosures.

County of *Westmeath*:—No establishment.

County of *Wexford*:—An asylum for the indigent poor and Lunatics, and also a ward for vagrant beggars, was instituted in January last, set on foot by voluntary subscription, amounting to £. 172. 4 s. 9 $\frac{1}{2}$ d. for fitting up the house, and for providing necessaries. At the last summer assizes £. 500 was presented for the support of the indigent poor, and and £. 100 for that of the Lunatic ward; the house, when fitted up, will contain 150; now therein fifty-one; seventeen of whom are idiots or lunatics; the medical gentlemen of the town attend gratis; those who are able to work are furnished with materials, and as a reward for their attention get half their earning.

County of *Wicklow*:—No establishment.

To the Right Honourable Robert Peel.

Sir,

Beareforest, Mallow, 19th December 1816.

IN reply to your favour of the 17th inst. I have to inform you, that there is a Lunatic Assylum for the reception of paupers, attached to the South Infirmary in the City of Cork, which is supported by presentments from both city and county, and is exceedingly well managed, under the superintendence of Doctor Sanders Hallaran, of Cork. The establishment is of considerable extent; but I cannot precisely say the number of patients it is capable

capable of receiving. The amount of the county presentments for the support of this asylum, have in general exceeded two thousand pounds a year, and the city contributes, I believe, nearly as much. A minute examination of the concern takes place at each assizes by a joint committee of the grand juries of the county and city. The accounts are carefully investigated, and Doctor Hallaran has obtained much credit for his active and intelligent discharge of his duties. The diet and general comfort of the patients are exceedingly well provided for, and lately an extensive plot of ground has been added to the concern, for the purpose of affording the convalescents the means of enjoying air and exercise.

I shall apply to Doctor Hallaran for a return of the number of patients the house can accommodate, and of the average expense of the concern, with such other particulars as he may have to state, and on receipt of them I will have the honour to forward them to you.

On the 12th instant I had the honour to forward to you, under two covers, certified copies of the presentments granted by the grand juries of the county of Cork at each assizes of the current year.

I have the honour to be, Sir,

Your most obedient and most humble servant,

Robert Delacour.

Sir,

Cork, December 21st, 1816.

HAVING been this day handed a letter from you, addressed to Mr. Phillipps, treasurer to this city, with a view to your obtaining certain communication respecting the state and nature of the Lunatic Asylum here established for the reception of pauper lunatics; I at his request have the honour to submit, for his Excellency's information, the following replies to the queries you have made, and trust they may prove satisfactory.

The Lunatic Asylum for the city and county of Cork was erected in the year 1788, under the 26th and 27th of the present King, by the President and assistants of the House of Industry, and has since continued attached to that institution. It was erected, and has been supported solely by presentments of the grand juries of the city and county, and I have the satisfaction to think, that the manner in which it has been conducted for the last twenty-five years, has been favoured with their approbation, as well as with that of the public at large.

The progressive increase of the number of insane, within the last ten years especially, has added so considerably to the admissions at this asylum, that the particular attention of the grand juries was necessarily attracted to the very limited building which was originally appropriated for them, and they saw the absolute necessity of enlarging it for their more suitable accommodation. This, by slow degrees, has been fully effected, and it now, under very advantageous circumstances, has been made capable of receiving *two hundred and fifty persons*; at present it contains *two hundred and twenty-four*, all labouring under the different modifications of mental alienation.

By means of this very important improvement, an additional square of building and court yard has been completed, which admits of the entire separation of the sexes, as well as the proper classification of the patients, according to the order in which they should be placed. Together with this essential arrangement, the governors have been enabled, through the generous acquiescence of the grand juries, to take a field adjoining the asylum, consisting of two acres and a half, which has been carefully inclosed, for the purpose of enlarging the means of general recreation, and also of giving an ample opportunity to the convalescents of moderate labour, in the exercise of horticulture, the benefits of which have been found to contribute, in a most striking manner, to their immediate tranquillity, as well as to the ultimate object of recovery. In effecting this salutary measure it may be proper to observe, that force is never resorted to, and that none are so employed but such as are thought worthy of the indulgence by continued good conduct. Another important result of this measure is, that a redundancy of vegetables, of the first description, is daily supplied to both houses, without any additional expense; the consequence of which is, that a better description of food is generally allowed, and an excellent beef soup porridge is substituted three days in each week, for a dinner of milk and potatoes: together with these, a sufficiency of oatmeal, bread and milk, is allowed for breakfast and supper; but there is no restriction to the directions of the attending physician, who has authority to use his discretion towards delicate patients, according to their several necessities. Each patient is clothed anew twice in each year in a suitable dress, and every possible care is bestowed in providing them with cleanly and well ventilated apartments, with good bed covering.

This establishment is under the special control of the Board of Governors, as directed by the Act of Parliament, who meet every Tuesday, to regulate its affairs, and by whom are appointed a physician, apothecary, house steward, matron, &c.; the annual expenses of which, together with the maintenance, clothing, &c. are included in the presentments at each assizes, and are raised conjointly by the city and county, and averaged according to the numbers belonging to each at the time being.

From what has been already said, it will I trust be admitted, that the curative, as well as the palliative treatment of those unfortunate people is, and has been, the first consideration; and that an undeviating reference to the relative comforts of those who have proved to be incurable has been faithfully maintained.

As references on those occasions are often of importance, I beg leave, on this occasion, to refer you, for the general character of this establishment, to the honourable Richard Hare, one of our county members; to Sir Nicholas Colthurst and Colonel Longfield,

members for the city; and also to Mr. Sumner, member for Surrey, who last year very minutely inspected it, and who expressed himself in terms highly satisfactory.

As physician to the institution for upwards of twenty-five years, and on whom has devolved no inconsiderable portion of care and responsibility in the general management and extension of this valuable asylum, I feel it my duty to submit to your consideration in particular this view of the exertions already bestowed by the city and county of Cork, in advancing to a state of much respectability this establishment, which it is but too evident were imperatively called for. Ample justice has been already done it in the statement made by Sir John Newport, on the 10th of April last, before the Select Committee for the better Regulation of Madhouses in England, in which the high honour of including my name as an efficient person, has been generously conferred; this, were any additional incentive necessary, would no doubt call for the most decisive perseverance on my part: and, conscious of the nature of the trust confided to me, I shall not be found to relax in my earnest assiduities, supported as I have been by the approbation of my fellow citizens.

I have the honour to annex the following amount of the annual expenses for the last five years, together with the total expenditure on the additional building; and also the cost of the insulating wall which incloses the field, now converted into a garden; and am,

Sir, with high respect,

Your obedient humble servant,

Wm. S. Hallaran.

				CITY.			Number in the House each Year.
				£.	s.	d.	
County granted, at Spring and Summer Assizes - - - - }	1812 - -	1,588	18 6 ½	1,216	11	3	164
- - - Ditto - - - - -	1813 - -	1,781	2 10 ½	1,371	3	2	178
- - - Ditto - - - - -	1814 - -	1,597	2 9	1,241	7	11	187
- - - Ditto - - - - -	1815 - -	1,557	6 7	1,222	6	½	205
- - - Ditto - - - - -	1816 - -	1,556	6 7	1,405	1	½	224
Expended in erecting the addition to the Asylum - - -				£.8,396	8	6	
- - Ditto - in inclosing the garden - - -				-	-	1,352	4 -

I beg leave, with great deference, to add, that should it at any time be thought necessary to require of me any further information on this interesting subject, I shall feel much pleasure in obeying his Excellency's commands, and in meeting your wishes, so far as circumstances shall enable me.

W. S. H.

A CALENDAR of LUNATICS confined in the County Gaol of Kilkenny.

Nº	NAMES.	Crime charged with.	OBSERVATIONS.
1.	John Dulanty - - -	Murder - - -	{ 3 June 1810 committed. Ordered to abide his trial.
2.	Michael Cuddihy - -	Attempting to murder -	29 May 1813.
3.	Andrew Delany - - -	Outrageous conduct -	20 October 1815.
4.	William Malone - - -	- - - - Ditto - - - -	27 November 1815.
5.	Ann Dollan - - - -	- - - - Ditto - - - -	21 January 1816.
6.	Bridget Whetan - - -	- - - - Ditto - - - -	9 March 1816.
7.	Catharine Woods - - -	- - - - Ditto - - - -	22 October 1816.
8.	John Maher - - - -	Felonious outrages - -	3 September 1816.
9.	William Buds - - - -	No crime - - - -	A city prisoner.

Sam. Leigh.

N. B.—Three discharged since last assizes.

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A CALENDAR of LUNATICS confined in the City Gaol of Kilkenny.

N ^o	NAMES.	Crimes charged with.	Place of Birth.	OBSERVATIONS.
1.	Mary Stapleton -	Outrageous conduct -	Co. of Kilkenny -	11 February 1814.
2.	Mrs. Cox - - -	- - - - Ditto - - - -	Athlone - - -	25 August 1814.
3.	Patrick Fenelly -	- - - - Ditto - - - -	City of Kilkenny	3 July 1816.

Thomas Tallent,

Keeper of His Majesty's City Gaol.

Number of LUNATICS and IDIOTS in the Kilkenny House of Industry, Dec. 26th, 1816.

N ^o	NAMES.	Age.	Character.	Place of Birth.	OBSERVATIONS
1.	Michael Fling - -	45	An Idiot -	Kilkenny.	
2.	James Maher - -	34	A Lunatic -	- Ditto.	
3.	James Elliot - -	40	- Ditto -	- Ditto -	Outrageous.
4.	James Grace - -	36	- Ditto -	- Ditto.	
5.	Richard Crery - -	40	- Ditto -	- Ditto.	
6.	Simon Flury - -	67	- Ditto -	Dublin.	
7.	Cath. Dempsey -	33	- Ditto -	Wexford -	Outrageous.
8.	Jude Kealy - -	40	- Ditto -	Kilkenny.	
9.	Mary Grace - -	27	- Ditto -	- Ditto -	Outrageous.
10.	Agnus Fitzgerald -	20	An Idiot -	Westmeath.	

None outrageous but three.

Andrew Bustard, Master of the House.

REPORT of the Lunatic Asylum, Kilkenny.

THE Lunatic Asylum at Kilkenny was originally intended to contain six cells for male enraged Lunatics, and six cells for females of a similar description, divided into *four wards of three cells* each; all the wards, and each of the cells, being distinct from each other. In front of each ward is a large open court, fifty-eight feet six inches long, by fifty-one feet six inches wide; and a necessary and straw shed are attached to each court. The enraged cells are elevated two feet above the surface of the ground, and flagged; and to render them as comfortable in severe weather as possible for the Lunatics, flues are conveyed under the floors, and the fireplaces are placed in the porter's lodge, where they are completely out of their reach. By a particular contrivance all these cells can be well lighted and well ventilated, or the contrary, at the option of the attendant physician; and this contrivance does not interfere with or diminish the usual and necessary light or ventilation. A correspondent *convalescent* ward is attached to each of the enraged wards, with four rooms in each, all distinct from each other, and suited in size to the returning health of the Lunatic. As the enraged cells are but six feet six inches wide by eight feet six inches long; the convalescent rooms are twelve feet six inches, ten feet high, and lighted by a proportionably large window. The same precaution for warming the rooms is taken as in the enraged cells, and these wards have a similar court in front of them, with their sheds and necessities. In the rear of the establishment is a large piece of ground, containing about an acre, immediately connected with it, which is intended as a garden for the use of the convalescents, and must be inclosed for that purpose, or it will be useless.

In the centre of the establishment, the house of the keeper is placed, and his living-room is so circumstanced that the business of the entire establishment is placed under his eye, as in four fronts of the octagon are four windows, one corresponding with each court and ward, which it commands: his kitchen is under him, on the ground floor, and his chambers are in the attic story over him, one for his assistant and one for himself. This building is insulated from all the courts and wards by a passage which communicates with them all.

By orders of the Committee, the accommodation has been restricted to a small number of persons, of moderate dimensions, for the purposes of economy: for the present, that

portion of the plan marked by a red tint is alone carrying into execution, which contains six enraged cells, four convalescent rooms, and the keeper's house. For want of completing the high exterior wall, I do not think it, in its present state, safe, as persons could come into the establishment, if they had any object in so doing; and were a Lunatic to be permitted the use of the court, he might by a little exertion escape; which will not be possible whenever the external wall is completed.

The amount of the original estimate for completing the entire establishment agreeable to the plan, was £.1,738. 14s. 6d.

The amount of the present part executing is £.986. 14s. 6d.

The whole establishment is intended for twenty persons, twelve supposed enraged Lunatics, and eight convalescent, or in the minor stages of this melancholy malady.

Kilkenny, December 26th, 1816.

W. Robertson, Architect.

To the Right honourable Robert Peel, &c. &c. &c.

Sir,

Kilkenny, 27th December 1816.

I HAD the honour to receive your letter on the 17th inst. and deferred answering it, until I could procure all the necessary information in my power, to lay before his Excellency the Lord Lieutenant.

There is no Lunatic Asylum in our county or city; but there are a few cells building on part of the ground attached to the House of Industry, by a presentment of £.986 from the County Grand Jury, which will be supported from the same fund; when the number of Lunatics confined in the two gaols and House of Industry is referred to, they will appear inadequate to contain them; but am informed, the inoffensive Lunatics will remain in the different places of confinement in which they are, and the violent put into the new cells when finished.

In the two gaols the Lunatics are not separated from the other prisoners, except at night, or when violent; they are then confined in the small cells in which they sleep.

In the House of Industry there is *no separation whatever* from the other persons confined there, and they are treated in every respect in the same manner.

On inquiry from the keepers of the gaols and House of Industry, I find there is no medical or other course followed to restore any of those unfortunate beings to a state of sanity; and they (the keepers) are (as I am) of opinion, that there are some now in this situation that might (by proper care) be restored to society and to their friends.

There is no place in which the same description of unfortunate beings are confined, where greater attention is paid to keep them and their apartments clean, or where they are treated with more lenity than in those places; there is no corporeal correction, or handcuffs used, but strait waistcoats (in some few instances) in the county gaol; confinement to their cells, when necessary, is the general treatment.

Enclosed are returns from the keepers of the gaols and House of Industry, of the number of Lunatics confined in each. I got them to make those remarks which I thought it necessary they should do.

I also enclose a plan of the cells now finishing for the reception of Lunatics, which I got Robertson, the architect, to sketch for me.

I have the honour to be, Sir,

Your very obedient servant,

Lewis Chapellin Kinchela.

The Report enclosed, which has been handed to me by Mr. Robertson, will I hope explain to the satisfaction of his Excellency the Lord Lieutenant the plan of the cells now building.

To the Right honourable Robert Peel, &c. &c. &c.

Sir,

Rockview, 22d December 1816.

I HAVE the honour of transmitting to you herewith, two copies of the presentments laid in on the county of Tipperary at Spring and Summer Assizes in this year. I have also the honour to acknowledge the receipt of your letter relative to the Asylum for Pauper Lunatics. As there is a very considerable establishment of that kind annexed to the House of Industry in Clonmell, I have been obliged to refer to the Governors of that establishment, to enable me to give you a correct return of what you require, which I hope to do in a post or two; I hope therefore you will excuse the delay.

I have the honour to be, Sir,

Your most obedient and very humble servant,

John Lane, Treasurer, County Tipperary.

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To the Right honourable Robert Peel, &c. &c. &c.

Sir,

Rockview, 26th December 1816.

AGREEABLE to your letter of the 17th inst. I have the honour to acquaint you, for the information of his Excellency the Lord Lieutenant, that there is an establishment at Clonmell, in the county of Tipperary, for the reception of pauper Lunatics; which establishment is annexed to that of the House of Industry in the before-mentioned town, and both are under the control and management of a board of governors, and are extensive.

The expenses attending the building and erecting them, as well as the yearly expense attending their support and maintenance, &c. has been all defrayed by presentments of the grand jury of this county at the several assizes past.

For the further particulars required by your letter, I beg leave to refer you to the enclosed Return, which I obtained from one of the governors of the House of Industry.

I have the honour to be, Sir,

Your most obedient and very humble servant,

John Lane, Treasurer, County Tipperary.

Enclosure.

The House of Industry at Clonmell was erected at the expense of the county of Tipperary, and cost about £.13,000: it is capable of containing about 200 persons.

There are now in the House and Hospitals:

Paupers - - - Men	-	-	-	-	-	2
Infirm - - - D ^o	-	-	-	-	-	38
Infirm Women	-	-	-	-	-	48
Paupers and vagrant ditto	-	-	-	-	-	24

In Hospital - - - $\left. \begin{array}{l} 112 \\ 26 \end{array} \right\}$ - - - Total, 138.

The Lunatic Asylum, under a superintendent, contains about 40 men and women. There are now therein, who are kept in separate cells, 31.

The whole is managed by a master and mistress, whose joint salaries are £.80 per annum.

The superintendent of the Lunatic Asylum and his assistant have £.65 per annum.

There is an attendant physician who is paid £.100 per annum by the county.

The whole establishment is supported by grants from the grand juries at each assizes, under a late Act of Parliament, and amounts to about £.1,400 per annum.

The management of the establishment is under the direction of a board of governors and two visitors daily; the board appoint a monthly committee, who meet every Wednesday.

The general board of governors meet the first Wednesday of each month, when all applications, &c. are made.

All magistrates of the county have a right to commit idle women, and vagrants of all descriptions.

They are fed with bread and stirabout for breakfast, and meat twice a week, and soup and potatoes every day for dinner.

At a Meeting of Governors, held at the House of Industry in Waterford;

The Bishop in the Chair.

A LETTER was laid before them by the county and city treasurers, from the secretary to the Lord Lieutenant, requesting information relative to the Lunatic Asylum, when the following Report was agreed upon; viz.

There is no distinct established asylum for lunatics in the county or city of Waterford; but part of the House of Industry is now, and has long been occupied by paupers of this description.

There are but sixteen solitary apartments, and those badly constructed, for the reception of lunatics; it therefore frequently happens there are a greater number of patients requiring close confinement, than the cells are capable of receiving; the others are lodged in the male and female wards, appropriated also for the accommodation of vagrants and idiots, the unavoidable promiscuous intercourse with whom is highly detrimental to the recovery of insane persons.

Previous to the year 1810, there was no fund for the exclusive support of lunatics and idiots; since that period the under-stated sums have been granted by the county and city grand juries; it is apprehended, however, that there is no law rendering it imperative on those juries to grant such sums, which leaves the support of this establishment in a very precarious situation. A more detailed statement of the opinion of the governors on this and several other points, may be found in the evidence given by the representative of this city, as published

published in the First Report of the Parliamentary Committee on the Madhouses, of last session.

Their diet is that of the vagrant side of the house; breakfast, stirabout and sour milk; dinner, potatoes and sour milk every day, except Sundays, when they have meat and potatoes; and Thursdays, when they have broth and potatoes; supper, potatoes and sour milk. When the attending physician thinks it necessary to order a better regimen to individuals, it is complied with.

Doctor Poole, the medical gentleman who now and for many years past has superintended this department, acts gratuitously; and we beg leave to subjoin his report thereon.

The number of lunatics in the house is,—males twenty-two, females twenty-two—total forty-four.

Presentments for the Lunatic Asylum.					From the County.		From the City.	
1810	-	-	-	-	-	£. 100	-	£. 100
1811	-	-	-	-	-	100	-	100
1812	-	-	-	-	-	100	-	100
1813	-	-	-	-	-	100	-	200
1814	-	-	-	-	-	200	-	200
1815	-	-	-	-	-	100	-	200
1816	-	-	-	-	-	200	-	200

Waterford, December 24th, 1816.

R. Waterford.

Enclosure.

The enclosed is a detailed report of the pauper lunatics and idiots at present accommodated in the Waterford House of Industry.

I have to observe that the apartments allotted for these persons are attached to the vagrant side of the house, and form a part of the general economy of the whole establishment, and are of course subject to the casual interference of the governors, visitors and others, and also to the noise and bustle of a house appropriated for the confinement of vagrants, sturdy beggars and prostitutes; the accommodations are in several respects insufficient, and ill adapted for the purposes intended, particularly the lunatic cells are (too few for the number of patients in general in the house) badly constructed and arranged, that even the personal security of the attendants is not always certain.

There are no rooms for exercise, or convalescents, and the idiots have promiscuous intercourse with the vagrants and other inmates of the house; and from their being no separate Establishment exclusively for the charge of the lunatics, besides the deficiency in point of accommodation, there is also a want of suitable attendance and many other requisites essential for the management, seclusion, and regular medical treatment of the patients; and I have always considered this department as calculated only for a place of refuge and personal safety of the unfortunate and destitute individuals. Every possible attention is paid to cleanliness, diet and treatment, as far as the nature and circumstances of the place will admit, but the whole is deplorably defective.

Waterford,
23d December 1816. }

Matt. Poole, M. D.
Medical Superintendent.

RETURN of Lunatics and Idiots accommodated in the Waterford House of Industry

NAMES.	Description.	When admitted.	Place of Residence.	OBSERVATIONS.
Michael Cummins	Idiot -	5 June 1787 -	Waterford -	Silly, inoffensive, very useful in the kitchen.
Mary Ruffe -	Lunatic -	25 October 1793 -	Dublin -	Occasionally subject to violent fits of insanity; confined to a cell.
Mary Bohanan -	- D° -	18 April 1796 -	County Waterford	Deranged; latterly very quiet and inoffensive.
James Wallace	- D° -	27 August 1796 -	County Wexford	Deaf; in general quiet and inoffensive.
Bridget Antony -	Idiot -	28 April 1799 -	Waterford -	Silly, inoffensive; works at the mills.
Johanna Power -	- D° -	16 July 1800 -	- - D° -	Silly, subject to epilepsy; spins occasionally.
Cath. Kerwan -	- D° -	21 June 1801 -	- - D° -	Silly, inoffensive, sickly constitution; works at the mills occasionally.
— Morgan -	- D° -	7 October 1802	Unknown -	Dumb, inoffensive; very useful about the House.
Richard Deatry -	Lunatic -	20 October 1803	Waterford -	Occasionally much deranged, and troublesome.
Bridget Burke -	- D° -	10 June 1804 -	- - D° -	In general inoffensive; spins occasionally.
Patt Neville -	- D° -	4 October 1804	- - D° -	Inoffensive; has had no violent fit of derangement for years past.
Johanna Mara -	- D° -	25 February 1805	County Waterford	Melancholy, and of a sickly constitution.
Cath. Power -	- D° -	6 August 1807 -	Waterford -	Violently deranged at times, and very troublesome.
Mary Pine -	Idiot -	6 July 1809 -	- - D° -	Silly, inoffensive; works occasionally.
Mary Green -	Lunatic -	19 May 1810 -	- - D° -	Very much deranged at all times; confined to a cell.
Richard Keating -	Idiot -	23 July 1811 -	- - D° -	Silly, inoffensive, of a sickly constitution.

Return of Lunatics and Idiots, &c.—continued.

NAMES.	Description.	When admitted.	Place of Residence.	OBSERVATIONS.
Cath. Kearney	Lunatic	2 April 1812	County Waterford	Much deranged on her admission; at present much recovered, and at work.
Johanna Keily	- D° -	21 June 1812	- - D° - -	Periodically attacked with violent fits of insanity; very troublesome, in a cell.
John Walsh	Idiot	3 Sept. 1812	Waterford	A boy, dumb, inoffensive, very helpless.
William M ^c Grath	- D° -	16 October 1812	County Waterford	Silly, inoffensive; works at the mills.
Patt	- D° -	2 Nov. 1812	Unknown	Silly, very filthy; totally incapable of working.
Cath. O'Brien	Lunatic	20 June 1813	County Wexford	Deranged, and occasionally troublesome; in a cell.
David Curtin	- D° -	4 April 1813	County Waterford	Latterly has had no violent fits of insanity; at present employed about the house.
Bridget Hayes	Idiot	21 May 1813	- - D° - -	Silly, inoffensive; occasionally employed in the mill shop.
Bridget Doyle	Lunatic	6 October 1813	County Wexford	Very much deranged, inoffensive.
John Curreen	- D° -	30 July 1814	County Waterford	Very much deranged, of a dark and sullen temper, confined to a cell, committed at the Summer Assizes of 1814 by an order from the Judges, having been guilty of a murder.
Mary Morrissey	- D° -	16 Nov. 1814	Waterford	Deranged, inoffensive.
Thomas Brown	- D° -	30 Nov. 1814	- - D° - -	Of late much deranged, of a violent temper; confined to a cell.
Mary Keefe	Idiot	27 Dec. 1814	County Waterford	Silly, inoffensive; occasionally works at the mills.
Robert Moxom	- D° -	2 February 1815	Waterford	Silly, inoffensive; very useful in the mill shop.
William Elliott	Lunatic	4 March 1815	County Cork	Occasionally much deranged.
Michael Foulter	Idiot	29 April 1815	County Waterford	Quite a simpleton; works occasionally in the mill shop.
Eliza Codd	Lunatic	17 May 1815	Waterford	Much deranged on being admitted, at present much recovered, and employed as a nurse-tender.
Johanna Mahony	- D° -	29 May 1815	- - D° - -	At present in a state of idiotism, inoffensive.
Margaret Regan	Idiot	21 June 1815	- - D° - -	Silly, inoffensive.
Mary M ^c Grath	- D° -	3 August 1815	- - D° - -	Silly, subject to epilepsy.
Thomas James	- D° -	13 Dec. 1815	County Waterford	Ditto - - ditto.
John Whelan	Lunatic	29 March 1816	Waterford	Occasionally much deranged.
John Fitzgerald	- D° -	8 June 1816	- - D° - -	Violently deranged, confined to a cell.
Edmund Power	- D° -	4 July 1816	County Waterford	Occasionally much deranged, and troublesome; confined to a cell.
Ellen Dower	- D° -	22 July 1816	- - D° - -	Very much recovered, a convalescent.
Hugh D'Arcey	- D° -	23 August 1816	County Cork	Very much deranged since his admission; confined to a cell.
Mary Delahunte	Idiot	12 Sept. 1816	County Kilkenny	Silly and inoffensive.
William Carey	- D° -	21 Sept. 1816	County Waterford	A boy, dumb, a cripple, silly, and very helpless.

Waterford,
24th December 1816.

Matthew Poole, M. D.
Medical Superintendent.

ABSTRACT of the Treasurer's Letters (Co. and City Waterford) dated 25 and 27 December 1816, to Mr. Peel, with Enclosures, annexed to the Abstract of Reports upon Lunatic Asylums in Ireland.

Samuel Roberts for the County, and James Alcock for the City, inclose the following Information:

At a Meeting of the Governors, the following was reported.

No distinct establishment; part of the House of Industry is now, and has been long occupied by Pauper Lunatics.

But sixteen solitary apartments, which are not sufficient for the number of Lunatics; the others are lodged in the male and female wards for vagrants and idiots, which is highly detrimental to their recovery.

Previous to 1810, there was no fund for the exclusive support of Lunatics: since that period, the following sums have been granted by presentment; but as the law is not imperative on juries, the grants are precarious: their diet is that of the vagrant side of the house, viz. stirabout and sour milk; dinner, potatoes and sour milk every day; on Sundays, they have meat and potatoes; on Thursdays, broth and potatoes; supper, potatoes and sour milk

milk. When physician thinks it necessary to order a better regimen to individuals, it is complied with.

Dr. Poole acts gratuitously.

Number of Lunatics now in the house is—Males 22, Females 22; total 44.

Presentments from County and City :

1810	-	-	£.100	-	£.100
1811	-	-	100	-	100
1812	-	-	100	-	100
1813	-	-	100	-	200
1814	-	-	200	-	200
1815	-	-	100	-	200
1816	-	-	200	-	200

Dr. Poole reports, that the accommodations are, in many respects, insufficient, and ill adapted to the purposes intended; lunatic cells too few, badly constructed and arranged; the personal security of the attendants is not always certain.

No rooms for exercise or convalescents; the Idiots have promiscuous intercourse with the vagrants; that there being no establishment exclusively for the charge of the Lunatics, besides the deficiency in point of accommodation; there is also a want of suitable attendance, and many other requisites essential to the management of the patients; and he considers the department as calculated only for a place of refuge and personal safety of the unfortunate individuals. Every possible attention is paid, as far as the nature and circumstances of the place will admit, but the whole is deplorably defective.

To the Right Honourable Robert Peel, &c. &c. &c.

Sir,

Rockview, 26th December 1816.

AGREEABLE to your letter of the 17th instant, I have the honour to acquaint you, for the information of his Excellency the Lord Lieutenant, that there is an establishment at Clonmell, in the County of Tipperary, for the reception of pauper lunatics, which establishment is annexed to that of the House of Industry, in the before-mentioned town, and both are under the control and management of a board of governors, and are extensive.

The expenses attending the building and erecting them, as well as the yearly expense attending their support and maintenance, &c. has been all defrayed by presentments of the grand jury of this county at the several assizes past.

For the further particulars required by your letter, I beg leave to refer you to the enclosed return, which I obtained from one of the governors of the House of Industry.

I have, &c.

(Signed)

J. Lane,
Treasurer Co. Tipperary.

Enclosure.

The House of Industry at Clonmell was erected at the expense of the county of Tipperary, and cost about £.13,000.

It is capable of containing about 200 persons.

There are now in the house and Hospitals:

Paupers	-	-	-	-	-	2
Infirm	-	-	-	-	-	38
Infirm	-	-	-	-	-	48
Paupers and vagrants	-	-	-	-	-	24
						112
In Hospital	.	.	.	.	.	26
						138

The Lunatic Asylum, under a superintendent, contains about 40 men and women. There are now therein, who are kept in separate cells, 31.

The whole is managed by a master and mistress, whose joint salaries are £.80 per annum.

The superintendent of the Lunatic Asylum, and his assistant, have £.65 per annum.

There is an attendant physician who is paid £.100 per annum by the county.

The whole establishment is supported by grants from the grand juries at each assizes, under a late Act of Parliament, and amount to about £.1,400 per annum.

The management of the establishment is under the direction of a board of governors and two visitors daily; the board appoint a monthly committee who meet every Wednesday.

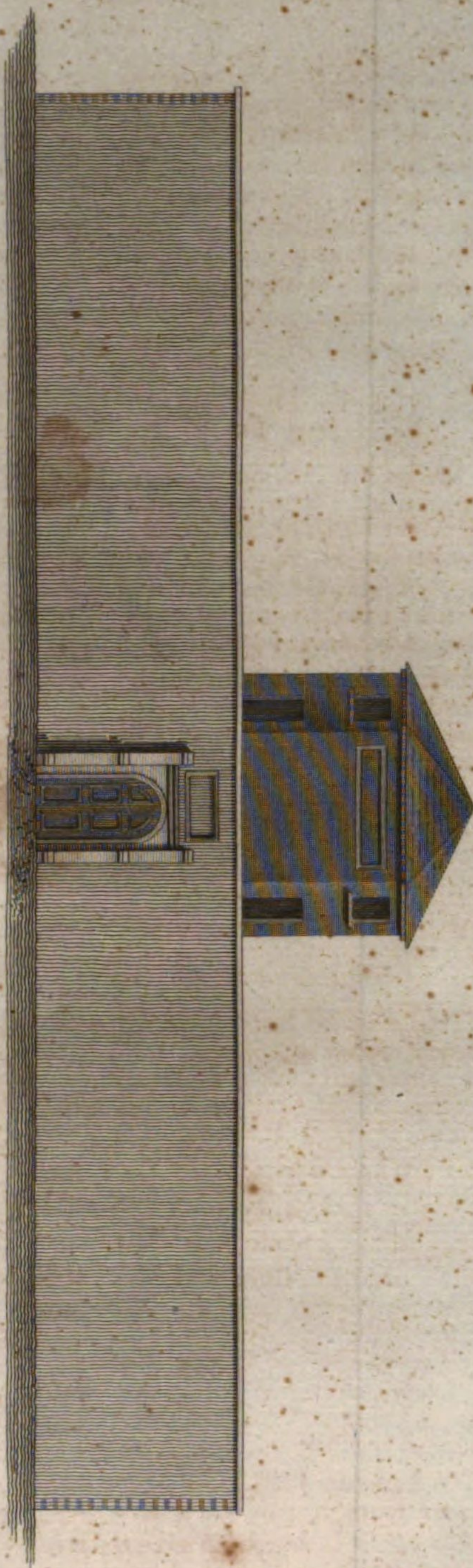
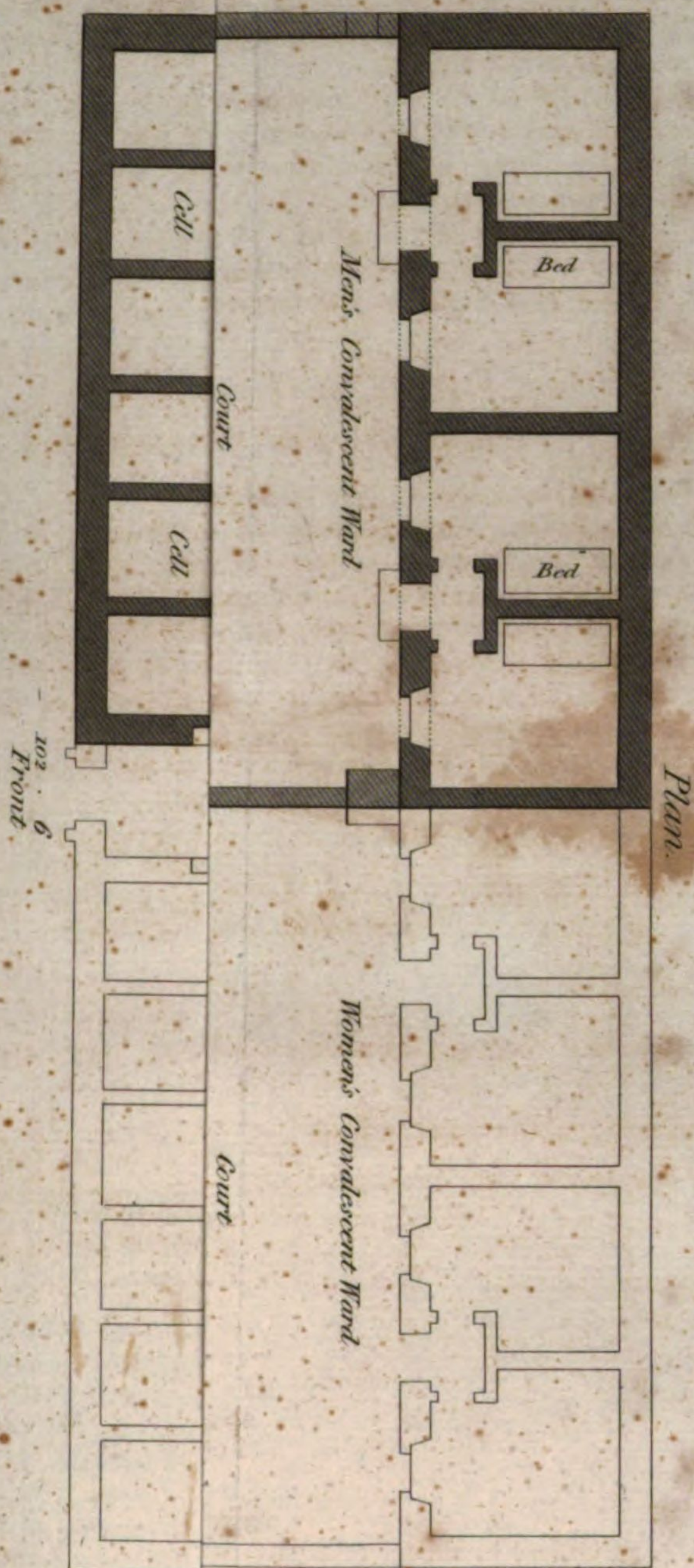
The general board of governors meet the first Wednesday of each month, when all applications, &c. are made.

All magistrates of the county have a right to commit idle women, and vagrants of all descriptions.

They are fed with bread and stirabout for breakfast, and meat twice a week, and soup and potatoes every day for dinner.

Right

my.



To the Right honourable Robert Peel, &c. &c. &c.

Sir,

Kilkenny, 27th December 1816.

I HAD the honour to receive your letter on the 17th inst. and deferred answering it until I could procure all the necessary information in my power to lay before his Excellency the Lord Lieutenant.

There is no Lunatic Asylum in our county or city; but there are a few cells building on part of the ground attached to the House of Industry, by a presentment of £.986 from the County Grand Jury, which will be supported from the same fund. When the number of Lunatics confined in the two gaols and House of Industry is referred to, they will appear inadequate to contain them: but am informed, the inoffensive Lunatics will remain in the different places of confinement in which they are, and the violent put into the new cells when finished.

In the two gaols the Lunatics are not separated from the other prisoners, except at night or when violent, they are then confined in the small cells in which they sleep.

In the House of Industry there is *no separation whatever* from the other persons confined there, and they are treated in every respect in the same manner.

On inquiry from the keepers of the gaols and House of Industry, I find there is no medical or other course followed to restore any of those unfortunate beings to a state of sanity; and they (the keepers) are (as I am) of opinion that there are some now in this situation that might (by proper care) be restored to society and to their friends.

There is no place in which the same same description of unfortunate beings are confined where greater attention is paid to keep them and their apartments clean, or where they are treated with more lenity, than in those places; there is no corporeal correction or handcuffs used, but strait waistcoats (in some few instances) in the county gaol; confinement to their cells, when necessary, is the general treatment.

Enclosed are returns from the keepers of the gaols and House of Industry of the number of Lunatics confined in each: I got them to make those remarks which I thought it necessary they should do.

I also enclose a plan of the cells now finishing for the reception of Lunatics, which I got Mr. Robertson, the architect, to sketch for me.

I have &c.

(Signed)

Lewis Chapellin Kinchela.

The Report enclosed, which has been handed to me by Mr. Robertson, will, I hope, explain to the satisfaction of his Excellency the Lord Lieutenant, the plan of the cells now building.

ENCLOSURES.

Number of Lunatics confined in the County Gaol	-	-	9
- - - - Ditto - - - - City Gaol	-	-	3
- - - - Ditto - - - - House of Industry	-	-	10

AND

Copy of REPORT of Mr. Robertson, annexed to this letter.—[Copy of the Plan could not be given here, as it is annexed to the Minutes of the Committee of the House of Commons.]

THE Lunatic Asylum at Kilkenny was originally intended to contain six cells for male enraged Lunatics, and six cells for females of a similar description; divided into four wards of three cells each, all the wards and each of the cells being distinct from each other: in front of each ward is a large open court 58 feet 6 inches long by 51 feet 6 inches wide, and a necessary and straw shed are attached to each court. The enraged cells are elevated two feet above the surface of the ground and flagged; and, to render them as comfortable in severe weather as possible for the Lunatics, flues are conveyed under the floors, and the fire-places are placed in the porter's lodge, where they are completely out of their reach. By a particular contrivance all these cells can be well lighted and well ventilated, or the contrary, at the option of the attendant physician; and this contrivance does not interfere with or diminish the usual and necessary light or ventilation. A correspondent *convalescent* board is attached to each of the enraged wards, with four rooms in each, all distinct from each other, and suited in size to the returning health of the Lunatic, as the enraged cells are but 6 feet 6 inches wide by 8 feet 6 inches long; the convalescent rooms are 12 feet 6 inches, 10 feet high, and lighted by a proportionably large window. The same precaution for warming the rooms is taken as in the enraged cells; and these wards have a similar court in front of them, with their sheds and necessities. In the rear of the establishment is a large piece of ground containing about an acre, immediately connected with it, which is intended as a garden for the use of the convalescents, and must be inclosed for that purpose, or it will be useless. In the centre of the establishment the house of the keeper is placed, and his living-room is so circumstanced that the business of the entire establishment is placed under his eye; as in four fronts of the octagon are four windows, one corresponding with each court and ward which

which it commands: his kitchen is under him, on the ground floor, and his chambers are in the attic story over him, one for his assistant and one for himself. This building is insulated from all the courts and wards, by a passage which communicates with them all.

By order of the Committee, the accommodation has been restricted to a small number of persons, and of moderate dimensions, for the purpose of economy. For the present, that portion of the plan marked by a red tint is alone carrying into execution, which contains six enraged cells, four convalescent rooms, and the keeper's house. For want of completing the high exterior wall, I do not think it, in its present state, safe, as persons could come into the establishment, if they had any object in so doing; and were a Lunatic to be permitted the use of the court, he might by a little exertion escape; which will not be possible whenever the external wall is completed.

The amount of the original estimate for completing the entire establishment agreeable to the plan, was - - - - - £.1,738. 14s. 6d.

The amount of the present part executing is - - - - - £.986. 14s. 6d.

The whole establishment is intended for 20 persons; 12 supposed enraged Lunatics and eight convalescents, or in the minor stages of this melancholy malady.

(Signed) *W. Robertson*, Architect.

Kilkenny, 27th December 1816.

ABSTRACT of the Treasurer's Letter, (County and City of Cork,) dated 19th December 1816, to Mr. Peel, and its Enclosure, annexed to the Abstract of Reports, upon Lunatic Asylums in Ireland.

THE Treasurer states that the Asylum for pauper lunatics in the city of Cork, is supported by presentment upon the county and the city; that the diet and comforts of the patients are well attended to under the superintendence of Doctor Hallaran, who is entitled to much credit for his active and intelligent discharge of his duties.

Doctor Hallaran the physician states, that the Asylum for the county and city of Cork was erected in the year 1788, under the 26 and 27 of the King, by the president and assistants of the House of Industry, and continues attached to that Institution, and has been conducted to the satisfaction of the public

That within the last ten years, in consequence of the increase of lunatics, considerable additions have been made to the original building, which is now capable of containing 250 persons; now therein 224. The sexes are separated and properly classed; two acres and a half of ground has been inclosed for exercise and labour in horticulture, which has produced the best effects; force is never resorted to, good conduct encouraged; vegetables abundantly furnished, which conduces to health; patients clothed anew twice a year, kept cleanly in dress, and apartments, with good bed covering.

Establishment under control of the Board of Governors, as by Act of Parliament.

Doctor Hallaran has been physician to the Asylum upwards of twenty-five years.

Annual Expenses for the last Five Years.

Granted by County.				City.			Number in the House.
	£.	s.	d.	£.	s.	d.	
1812 - - - -	1,588	18	6½	1,216	11	3	164.
1813 - - - -	1,781	2	10½	1,371	3	2	178.
1814 - - - -	1,597	2	9	1,241	7	1	187.
1815 - - - -	1,557	6	7	1,222	6	½	205.
1816 - - - -	1,556	6	7	1,405	1	½	224.

Expended in erecting the addition to the Asylum - - - £.8,396. 8. 6.

Ditto in inclosing Garden - - - - - 1,352. 4. 0.

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Appendix, No. 3.

COPY OF A LETTER from Mr. *James Cleghorn*, of Saint Patrick's or Swift's Hospital, giving some Account of the Hospital; dated 17th March 1817; with a RESOLUTION of the Committee of Governors, dated 26th November 1810.

My Dear Sir,

I OBSERVE that there is an inquiry on foot before a Committee of the House of Commons at present, on the subject of the state of Lunatic Asylums in Ireland; and as every measure involving the interest of the country, or the general cause of humanity, will naturally excite your feeling and fix your attention; I hope you will excuse me for addressing to you a few lines on the subject of an establishment for insane persons, in which I am myself concerned so far, as I know the only notice which has been taken in Parliament of Saint Patrick's, or Swift's Hospital as it is called, was in the testimony of the honourable Mr. Bennet, which is contained in the Third Report of the Committee on Lunatic Asylums, published by Parliament last year. The general tenor of Mr. Bennet's observations was correct and creditable to our hospital, and I am happy to be able to add that since his visit to Dublin, very considerable improvements have been made for the accommodation of its inmates. It was remarked that there was little or no classification of the patients, little medical and not much mental treatment.

I am fully aware of the advantages to be derived from the dividing the different description of insane persons into classes, according to the nature and stage of the disease; and above all, of the propriety of separating the convalescent from those still in a maniacal state. The original construction of Swift's Hospital does not admit of their separation, as it consists of six very long corridors or galleries, each containing twenty-eight cells, such as have been described by Mr. Bennet. I was very anxious to have some separate cells for the noisiest of the patients, built apart from the principal building; and accordingly about six or seven years ago, when the governors applied to Government for aid, to enable them to repair the hospital, I drew up a Memorial, which was presented to Mr. Pole, with plans and estimates for the repairs and for the separate cells; but although the Government were so good as to grant us support for the repairs, no money would be granted for the separate cells: the reason assigned for refusing the latter part of the prayer in the Memorial, was the great accommodation for the insane, which the Richmond Lunatic Hospital would afford, which was then in progress.

Government, I am convinced, in refusing us these cells, acted with the best intentions; but I believe, if the information since laid before the legislature had been known generally, and as well authenticated then as now, the reasonableness of enabling us to adopt the system of classification in the most material point would have ensured to us more extensive aid; medical treatment in maniacal persons, and the insane in general, except in the very early stages of the disease, has ever appeared to me to be of little service towards the cure of it: in this opinion I am warranted by the experience of most men conversant in the treatment and management of such persons here, as well as in Great Britain. The insane are liable to bodily ailments, which require to be treated medically in the same way (sometimes more actively) as in sane persons; but I think, generally speaking, from the experience of fourteen years, I may add that they are less subject to bodily disease than other persons; moral treatment, as it is called, is of much more moment than medical, and I am sure that in this particular, much improvement has taken place of late years; and that the late investigations will contribute much to the amelioration of the state of lunatics. The system observed in Swift's Hospital, before I was concerned in it, was of the most humane kind; and it has always been my object to avoid any other coercion or restraint but what was required for the safety of the patients and those around them. The strait waistcoat and handcuffs are seldom resorted to, and we prefer the latter to the former, as being more convenient for cleanliness, and not so heating; occasional confinement to the cell is the principal restraint which we employ. In the evidence given before the Committee respecting servants in Swift's Hospital, the number is multiplied by mistake; it is said that each boarder has a servant: this accommodation is afforded only to the boarders of the highest class, who have not a cell, but a room with a fire-place for their exclusive use. The number of fire-places in the galleries is three; but Mr. B. only noticed two. It has also been observed that there were women seen in the galleries occupied by the male patients. There are three men-keepers in the galleries for the men, who employ female servants to wash the wards and to clean out the cells for the patients, and these were the females seen in the male galleries; but not patients, as might be supposed from the statement. At the time that I applied for the separate cells for noisy patients, I was so well convinced of the great advantage to be derived from extensive airing grounds for the insane, that I proposed that we should be enabled to take a field adjoining the hospital for that purpose. The state of our finances, and no aid being to be had, precluded us from thinking of the field at that time. The importance of such an acquisition, however, has been rendered so conspicuous, from the Reports of the Committee of the House of Commons, that I succeeded, last spring, in prevailing on the Governors to take a lease of the ground on the east side of the hospital, containing two acres and a half, and affording a good view into the Phoenix Park, where the greater number of the patients are at liberty to walk about and to take exercise. Many of them have been employed, with their own consent, in working the ground, and have been much happier and freer from their malady in consequence of it. I am of opinion, that the system of giving them employment, where they are willing to work, will be of much

use. It is a curious fact with respect to these persons, that there is no disposition to co-operation among them. I have never known them to combine together to accomplish one object; they distract one another; and although they will affect to deceive you, with regard to the state of their own minds respectively, yet they will make very free in their observations on the freaks and whims of those around them. We have made a ball court for them in the field; but I have great doubts if they will ever agree to play a match at ball. There is a man, who is liable to very furious paroxysms, now in the hospital, who was employed in digging at gardener's work; he had a return of his illness since we got the field, and the first symptom of its access that he showed was, to retire from the place where the rest were working, and he refused to be near them at all. I happened to see him, and guessed at the approach of the paroxysm, which came on with great violence the same night.

This indisposition to co-operation stands much in the way of the system of employment; but it is a source of much safety to the managers of the insane; they require fewer attendants; and the degree of distrust which they show towards each other, with a knowledge of their propensities, under the accession of their paroxysms, gives a good clue to an observant keeper to direct him to the treatment of his patients. We have procured also some ground on the west side of the hospital for the females to exercise in, which will not only serve for airing ground, but it will contribute much to give light and air to the basement story, which appeared too dark and confined before.

The separation of the sexes will be preserved better than heretofore. I have taken the liberty, in writing to you on this subject, to found my observations on the testimony of Mr. Bennet, whose humanity, so generally acknowledged, led him into our hospital, as well as many other abodes of wretchedness of the same kind, both because I thought it the readiest way to convey information to you, and also because I thought that should that gentleman come in your way he might be glad to hear that we had profited by his visit, and endeavoured to improve the condition of the inmates of the hospital in consequence of his observations. I wish, while writing to you on this subject, to take notice of certain statements which I have seen in the public prints, as having been lately made in the House of Commons, relative to the conveyance of mad persons to Dublin from the country. It has been said, that they have been tied to cars, and so bruised as to render the amputation of their limbs necessary, and that death has ensued from the mortification occasioned by this cruel mode of conveyance. During fourteen years I have attended Swift's Hospital, I have never known an instance of the kind where any ill consequences have followed. We have patients from all quarters of Ireland and in all states of madness, and I can safely say, that in the conveyance of the patients to the hospital they never appeared to me to have suffered any wanton cruelty, though in a few instances there may have been visible signs of ligatures on the arms. I never knew any number of persons to be sent to our hospital at once from a distance, except in one instance, and that was on the breaking up of an establishment in Waterford, when thirteen persons, in different states of deranged mind, were brought from thence, and not one of them had suffered in any manner from the conveyance. Our patients come singly from every part of the country: two of the last that came in were from opposite quarters, one from Larne, another from Connaught, recommended by the Archbishop of Tuam. I hear it rumoured, that it is intended to have either Provincial or County Asylums for Lunatics and Idiots: such a design is founded in wisdom and humanity, and will be a great relief to the pressure on the establishments in the capital. Places of this kind, unless under a strict rule for a limited period of residence, beyond which no person will be allowed to remain in them, must become asylums for mad persons, and not hospitals or places for the cure of insanity. I have already said that the insane are healthy in body; I might go farther, and say they do not die in proportion to the rest of mankind after their disorder has been confirmed. In Swift's hospital we did not lose by death one boarder last year, and only six paupers died last year, and six the year before, most of whom were old persons. There was not a sick person in the hospital yesterday; but one, when I visited it. It so happens that no person has noticed the number of insane confined in Swift's Hospital, in the late remarks on this subject in the House. I think it would be right that the utility of this establishment should be taken into account along with another great hospital, called the Richmond Lunatic Asylum, built on the best principles lately, and said to have cost £.75,000, and intended for the cure of recent cases only. The report from this Asylum in the almanack, shows that the proportion of deaths is very considerable in recent cases of madness, for they lost 24 out of 325 who passed through the hospital in eleven months.

State of Swift's Hospital at present:

Paupers	-	-	96
Boarders	-	-	53
			149

The expenditure of the hospital, on an average of four years, would amount to £. 5,514 per annum; this would be high on the gross number, if you were to average the expense on all alike, being about £. 37 a-piece; but it must be taken into account, that the expense of feeding the boarders is high, as they have the best meat in the market, and the best joints, with tea for breakfast. The boarders of the first class have each a servant to wait on them; the paupers are clothed at the expense of the house; the income of the hospital from landed property,

property, amounts to something above £.4,000 perhaps, and the saving arising to the Governors from the pension paid by the boarders, enables them to defray the expense of supporting so great a number of paupers. Saint Patrick's Hospital has had no public aid whatever since the Union, except for the repairs of the hospital, about seven years ago. Together with this statement, I send you an extract from the Minute Book of the Governors, to show you that the idea of separating the noisy and maniacal patients from the rest, and for getting airing grounds of sufficient extent for them to exercise in, was not altogether new: you will observe it is dated in 1810.

I find that I have spun out the foregoing so unseasonably, that I must close it without apology, since that would only increase my fault.

Believe me always most truly,

Your humble servant and faithful friend,

March 17th, 1817.

James Cleghorn.

THAT it appears to the Committee, that so soon as the repairs absolutely necessary to the present buildings shall have been accomplished, it would be very desirable to have returns erected from the north ends of the wards across the gardens of the master and housekeeper, by which separate accommodation would be obtained for the most maniacal of the patients, constructed for their security, and so far removed from the present wards as to secure the peace and quietness of the convalescent and less turbulent.

That the possession of the ground between the Hospital and Stevens's Lane would also be expedient, provided means could be obtained to accomplish an object of such consequence to the interests of the Charity; and that one of the Governors should be requested to communicate with Mrs. Cooke and the occupying tenant, on the subject of the terms on which the ground may be got.

And finally, it appears to the Committee that the repairs and other improvements essentially necessary to the carrying into final effect the purposes of this Charity, will require a sum of money to which the funds of the Hospital are entirely inadequate, and therefore that it would be expedient to prepare a petition to Parliament, praying for a grant of such aid as may be found to be requisite for the before-mentioned purposes; and the Committee would recommend that Mr. Parke, architect, be directed to prepare plans and an estimate to accompany said Petition.

26th November 1810.

J. W. Keatinge,

Dean of Saint Patrick's.

LUNATIC ASYLUMS

Printed by The Board of Commissioners for the Poor

25 June 1817

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R E P O R T

FROM

SELECT COMMITTEE

ON

PAUPER LUNATICS

IN THE COUNTY OF MIDDLESEX.

AND ON

LUNATIC ASYLUMS.

Ordered, by The House of Commons, to be Printed,
29 June 1827.

R E P O R T

THE SELECT COMMITTEE appointed to inquire into the State of the Lunatic Asylums in the County of Middlesex, to consider the Propriety of extending the provisions of 14 Geo. 3. c. 49. to Pauper Lunatics, and of the consolidation of all Acts relative to Lunatics and Lunatic Asylums, and of making further Provision relative thereto:—Have, pursuant to the Order of the House, considered the subject to them referred, and agreed to the following REPORT:

THE REPORT	p. 3.
APPENDIX	p. 9.
MINUTES OF EVIDENCE	p. 13.

From the Registers of the Visitors appointed by the College of Physicians, and from other testimony, Your Committee might infer, that however great its defects may be, Mr. Warburton's Establishment has hitherto been considered as good as the regularity of Pauper Lunatics is received in the neighbourhood of the metropolis; but if the White House is to be taken as a fair specimen of similar establishments, Your Committee cannot too strongly or too anxiously express their conviction, that the greatest possible benefit will accrue to Pauper Patients by the erection of a County Lunatic Asylum.

The Select Committee of 1815, called the attention of the House to the following abuses in the management of the Houses for the reception of Lunatics:

1. Keepers of the Houses receiving a much greater number of persons than they are calculated for, and the consequent want of accommodation for the patients, which greatly retards recovery.
2. The insufficiency of the number of keepers in proportion to the number of persons intrusted to their care, unavoidably leading to a proportionably greater degree of restraint than the patients would otherwise require.
3. The union of patients who are outrageous with those who are quiet and inoffensive.
4. The want of medical assistance, so applied to the wafery for which the persons are confined.
5. The detention of persons whose minds do not require confinement.
6. The insufficiency of the stipend on which patients are received into the Houses.
7. The defective management of Pauper Lunatics, under the provisions of the 14 Geo. 3. c. 49.

R E P O R T.

THE SELECT COMMITTEE appointed to inquire into the State of the PAUPER LUNATICS in the County of *Middlesex*, to consider the Propriety of extending the provisions of 14 Geo. 3. c. 49. to Pauper Lunatics, and of the consolidation of all Acts relative to LUNATICS and LUNATIC ASYLUMS, and of making further Provision relative thereto;—HAVE, pursuant to the Order of The House, considered the subject to them referred, and agreed to the following REPORT :

IN the course of their Inquiry into the state of the Pauper Lunatics of the County of Middlesex, the attention of Your Committee has been particularly directed to the treatment of the Male Paupers of the parishes of *Marylebone*, *St. George Hanover Square*, and *St. Pancras*, who have been or are confined in the White House at Bethnal Green, belonging to Mr. *Warburton*. The Evidence thereon is specially submitted to the consideration of the House.

From the Registers of the Visitors appointed by the College of Physicians, and from other testimony, Your Committee might infer, that however great its defects may be, Mr. Warburton's Establishment has hitherto been considered as good as the generality of licensed Houses where Paupers are received in the neighbourhood of the metropolis; but if the White House is to be taken as a fair specimen of similar establishments, Your Committee cannot too strongly or too anxiously express their conviction, that the greatest possible benefit will accrue to Pauper Patients by the erection of a County Lunatic Asylum.

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“ them than they are calculated for; and the consequent want of accom-
“ modation for the patients, which greatly retards recovery.
- “ 2. The insufficiency of the number of keepers in proportion to the number
“ of persons intrusted to their care, unavoidably leading to a proportionably
“ greater degree of restraint than the patients would otherwise require.
- “ 3. The union of patients who are outrageous with those who are quiet and
“ inoffensive.
- “ 4. The want of medical assistance, so applied to the malady for which the
“ persons are confined.
- “ 5. The detention of persons whose minds do not require confinement.
- “ 6. The insufficiency of the certificates on which patients are received into
“ Madhouses.
- “ 7. The defective visitations of Private Madhouses, under the provisions of
“ the 14 G. 3. c. 49.”

The Evidence taken before Your Committee, leaves no doubt that these observations are still applicable to licensed Houses where Paupers are received in the neighbourhood of the metropolis, and they are apprehensive that similar abuses elsewhere prevail, as no improvement has taken place in the law. It has been clearly established in evidence, that there is no due precaution with respect to the certificates of admission, to the consideration of discharge, or to the application of any curative process to the mental malady. Your Committee therefore repeat, adopt, and confirm, the recommendations of the Committees of 1807 and 1815, and they trust that every effort will be made during the recess, by all persons concerned in the control and management of their establishments, to improve the condition of the unfortunate Lunatics committed to their charge; and they further recommend, that legislative measures of a remedial character should be introduced at the earliest period of the next Session. They have therefore in consequence prepared a Series of Propositions, which they beg to offer as the basis of future Legislation. Your Committee have purposely omitted any statement of fines and penalties, conceiving such points may more properly be considered when any Bill or Bills shall be introduced.

Your Committee are aware that some expense may be incurred by the system of visitation they recommend, but the appropriation of the fees on licences (which might perhaps be increased,) and fines levied, would defray a considerable part of such expense; and Your Committee confidently anticipate that the additional sum required will not be considered of importance, when compared with the great and practical benefits to be derived from an extended and improved system of regulating and visiting Lunatic Asylums.

1.

THAT it is expedient to repeal the Acts of

17 Geo. 2. c. 5. § 20 and 21.

48 Geo. 3. c. 96.

51 Geo. 3. c. 79.

55 Geo. 3. c. 46.

56 Geo. 3. c. 117.

59 Geo. 3. c. 127.

5 Geo. IV. c. 71.

39 and 40 Geo. 3. c. 94.

And to consolidate into one Act of Parliament the provisions of the same, and to make such further provisions as will facilitate the erection of County Lunatic Asylums, and improve the treatment of Pauper and Criminal Lunatics.

2.

THAT it is expedient to repeal the Acts of 14 Geo. 3. c. 49.

19 Geo. 3. c. 15.

26 Geo. 3. c. 91.

And that an Act of Parliament should be passed, under the provisions of which all Houses for the reception of Insane Persons, except County Pauper Lunatic Asylums, St. Luke's, and Bethlem Hospitals, should be licensed and regulated; and that the following provisions should form the ground work of such Act.

THAT

3.

THAT it is expedient that the Secretary of State for the Home Department do, on the day of in every year, by an instrument under his hand and seal, appoint persons, of whom not less than five shall be police magistrates, together with five physicians, to be Visitors within the cities of London and Westminster, within seven miles thereof, and within the county of Middlesex; and that the Secretary of State for the Home Department do appoint a clerk to attend such Board of Visitors, and to record their proceedings.

4.

THAT such Visitors do meet at least four times in each year, and at such meetings the said Visitors (five to be a quorum, two of whom at the least to be magistrates) shall, if they think fit, grant licences to all persons requiring the same, for keeping houses for the reception of two or more Lunatics, within the cities of London and Westminster, and within seven miles thereof, and within the county of Middlesex, such licences to be for one year from the date thereof; and that in case the said Visitors shall think fit to refuse any licence so applied for, they shall state their reasons in writing, and deliver a copy of such reasons to the person so applying.

5.

THAT in other parts of England and Wales, the magistrates assembled in quarter sessions, shall, if they think fit, grant licences, such licences to be for one year, to all persons requiring the same, for keeping houses for the reception of two or more Lunatics in their respective counties; and that the clerk of the peace or his deputy in each county, shall act in the same manner within his county, as the clerk to the Board of Visitors, within the cities of London and Westminster, within seven miles thereof, and within the county of Middlesex, and that in case the Justices of quarter sessions shall think fit to refuse any licence so applied for, the reasons of such refusal or suspension shall be delivered in writing to the party applying.

6.

THAT previous to the granting of any such licence, the person requiring the same, shall give one month's notice in writing to the clerk of the said London Visitors, or the clerk of the peace or his deputy (as the case may be) accompanied by a plan of the house proposed to be licensed, which plan shall be afterwards deposited with the clerk of the Visitors, or clerk of the peace; and the proprietor, if licensed, whenever he shall make any alterations in his house, shall transmit an amended plan of the same, containing all such alterations laid down thereon, to the clerk of the said London Visitors, or clerk of the peace, or his deputy, as the case may be.

7.

THAT previously also to the granting of any such licence, three at least of the said London visitors (one of whom shall be a magistrate); or if not in London, &c. any two magistrates resident in the neighbourhood, and a physician, or surgeon or licensed apothecary, shall visit such house, and shall report to the Board of London Visitors or court of quarter sessions, as to the fitness of such house for the reception of Lunatic Patients, the number which it is capable of containing, and its conformity to the plan delivered.

8.

THAT every person concerned and interested in the house to be licensed, shall be named in the licence, and shall be responsible for the management of such house; and that one person so interested shall be actually resident in such house, if it contain fifty patients, and in houses containing less than fifty patients, the name of the actual resident superintendent shall be inserted in the licence.

9.

THAT in all parts of England and Wales, except London, &c. the magistrates in quarter sessions assembled, shall appoint for each licensed house within their district two magistrates and one physician, or surgeon or licensed apothecary, to act as visitors.

10.

THAT every house so licensed shall be inspected by three London Visitors, (one of whom to be a magistrate), or by the Visitors appointed at quarter sessions, as the case may be, at least four times in every year, and at all other such times as they shall think fit, at any hour of the day or night; such London or country Visitors to be attended by the clerk of the London Visitors, or clerk of the peace or his deputy, who shall make a minute of the state and condition of the house, comparing every room thereof with the plan deposited, and ascertaining by personal inspection the state of each apartment, of the number of the keepers regularly employed, and of the number of patients confined therein at the time of such visit, which minute shall be afterwards fairly transcribed into a proper book or register; and in case the London Visitors or visiting magistrates and physicians shall find cause of complaint against the proprietor of such house, the clerk shall transmit a copy of such complaint to the proprietor, who may be summoned, if it be thought necessary, to attend the next quarterly meeting of such London Visitors, or the quarter sessions of the county, as the case may be, to be examined relative to such complaint.

11.

THAT on a special application to the Secretary of State for the Home Department, relative to Lunatics or Lunatic Asylums in the country, he may appoint any of the above London Visitors, together with any physicians or magistrates of the county from whence the complaint shall come, according as the nature of the case may require, to make such inquiries as he shall think fit to direct, and to report to him thereupon.

12.

THAT no keeper of any house licensed for the reception of Lunatics, shall receive any Lunatic, except a Pauper Lunatic, without first having an order in writing under the hand of the person by whose direction such Lunatic is sent to his house; in which order, shall be stated the degree of relationship or circumstance of connexion between such person and the lunatic, and the name, place of residence, former occupation, date of the commencement of illness of the Lunatic, and the Asylum (if any) in which the Lunatic shall have been previously confined, and also a certificate under the hand of two members of the College of Physicians or College of Surgeons, or licensed apothecaries, who shall state that such Lunatic is a proper person to be confined, and the day on which he shall last have been examined by them; nor shall the keeper of any Lunatic Asylum receive any person into his establishment, if such last examination shall not have taken place within the fourteen days next preceding; but the
keeper

keeper of any licensed house shall be authorized to receive a Pauper Lunatic under an order from any magistrate, together with a certificate of insanity, signed by the usual medical attendant, the rector, vicar or curate, and one of the overseers of the poor of the parish to which such Pauper Lunatic belongs.

13.

THAT within three days after receipt of such order and certificate, a copy thereof shall be transmitted to the clerk of the London Visitors, or to the clerk of the peace or his deputy (as the case may be), who shall enter the same in a register to be provided for that purpose; and that such clerk shall make therefrom a register, containing the true name of each Lunatic so returned to him, and the Asylum in which such Lunatic is confined, which last-mentioned register shall be open to the inspection of any person requiring to see the same.

14.

THAT whenever 100 patients or upwards shall be confined in any one house, there shall be a resident medical attendant, who shall keep a register of the cases of all the patients under his care, the treatment and system pursued with regard to their mental and bodily disorders, and the medicines prescribed or administered; and that such register shall be open to the inspection of the London Visitors, or visiting magistrates and physicians in the country, and there shall be inserted in such register by the proprietor or superintendent, or medical attendant of such Asylum, the name of every patient under coercion, and the nature, degree and duration of such coercion.

15.

THAT wherever there are less than 100 patients confined, there shall be daily medical attendance, and a similar register kept, which shall be open to inspection in like manner.

16.

THAT no convalescent patient shall be employed as assistant keeper about *the persons* of other patients.

17.

THAT the overseers of the poor and medical attendant appointed by each parish shall have liberty to visit the Pauper Lunatics of their respective parishes at all hours of the day or night.

18.

THAT all county magistrates, in addition to the Visitors or visiting magistrates, shall have liberty to visit all houses licensed for the reception of Lunatics within their respective counties, between the hours of eight in the morning and eight in the evening.

19.

THAT in every case of the death of any patient in such licensed house, a coroner's inquest shall be held upon the body; and if such coroner shall see fit, he shall direct the body to be examined by a medical man not belonging to the establishment.

20.

THAT in case the London Visitors or visiting magistrates and physicians appointed at quarter sessions, who shall visit the licensed houses, shall have reason, on examination, after *two separate visits*, to believe that any patient confined in any of these houses has recovered the use of his faculties, they shall

make a report thereof to the next quarterly or other meeting of the said London Visitors or to the magistrates at quarter sessions, as the case may be, who shall have power to order the discharge of such Lunatic, with or without further examination, due notice having been given to the keeper of such Asylum, of the intention on the part of the Visitors to apply for such discharge.

21.

THAT in order to provide for the due care of such Lunatics as are confined separately, it is expedient that every person who shall receive into his house for hire (such house not being licensed) any one Lunatic, shall, within three days after the arrival of such Lunatic, transmit to the clerk of the Commissioners or clerk of the peace of the county, as the case may be, a copy of the order and certificate; without which, such as in the case of licensed houses, no such Lunatic shall be received; and on the 1st of January, or within three days thereof, in every year, he shall transmit to such clerk a certificate, signed by two medical men, describing the then actual state and condition of such Lunatic; and in case of the death, removal or discharge of such Lunatic, he shall forthwith notify the same to such clerk, which said orders, certificates and notifications shall be duly entered in a register to be kept for that purpose; and that the said clerk shall make therefrom a separate register, containing the true name of each Lunatic so separately confined, together with the place of confinement, which last-mentioned register shall be open only to the inspection of the Secretary of State, London Visitors, or Chairman of Quarter Sessions, in their respective counties, and to such persons as are authorized to inspect the same by an order under the hands of the Secretary of State or Chairman of Quarter Sessions, in their respective counties; and that every such house shall be subject to the same visitation as licensed houses, which, however, shall only take place by order of the Secretary of State, London Visitors, or Chairman of Quarter Sessions, in their respective counties.

22.

THAT all Lunatics confined in custody of their relatives and friends or of a committee appointed by the Court of Chancery, shall not be registered, and shall not be subject to visitation, except by the authority of the Secretary of State for the Home Department, who shall be empowered, on special application, to appoint, if he shall think fit, Visitors for such purpose in the same manner as for special visitation of Lunatics or Lunatic Asylums in the country.

Your Committee beg leave to conclude their Report by referring the House to the Appendix, containing the Evidence and other Papers.

29 June 1827.

A P P E N D I X.

Appendixes, N° 1 & N° 2.

PAPERS PUT IN.

THE attempt to procure through the ordinary forms of Parliamentary Returns full information respecting Lunatic Asylums has not been satisfactory. The following counties have not in any respect furnished the information desired :

Bedford.	Cumberland.	Northampton.
Berks.	Derby.	Northumberland.
Bucks.	Devon.	Nottingham.
Cambridge.	Huntingdon.	Rutland.
Chester.	Middlesex.	Suffolk.
Cornwall.	Monmouth.	Westmorland.

In order to procure a full statement of the facts, the following Forms of Returns have been prepared, marked (N° 1. and 2.) as well as the inquiries, marked (N° 3.) These papers are put in, as they may enable magistrates, and persons who are disposed to interest themselves in inquiries into the condition and treatment of the Insane, to carry on their investigations in the manner most likely to lead to a practical result.

June 26, 1827.

PARISH RETURNS.

(N° 1.)

I DO hereby certify, That the following is a just and true Account of all the Lunatic Paupers who are in any degree or manner supported by the parish of _____ and who are in any public or private Asylum.

Name of the Pauper.	Name of the Lunatic Establishment.	How long the Lunatic has been confined there.	Number of Paupers sent to each of the foregoing Lunatic Establishments from the Parish, within the last ten years ; Also the Number returned cured.	Weekly Cost.	Observations.

(N° 2.)

I DO hereby certify, That the following is a just and true Account of all the Lunatic Paupers who are in any degree or manner supported by the parish of _____ and who are not in any public or private Asylum.

Name of Pauper.	Where placed, and during what period.	How long deranged.	Weekly Cost.	Observations.

To be signed by the parish officers, and the clergyman and a medical man belonging to the parish.

(N° 3.)

INQUIRIES relative to LUNATIC ASYLUMS, and the treatment of the INSANE.

SITUATION OF THE BUILDING.

- 1.—Is the situation sufficiently elevated, dry, airy, and moderately sheltered? Does it combine retirement with cheerfulness? Is it convenient of access?
- 2.—What extent of ground is occupied by the Establishment; and how are the premises appropriated as respects garden ground, &c.?

PLAN.

- 3.—What number of Patients is the Establishment calculated to receive?
- 4.—If a public Establishment, what was the cost of the building and furniture?
- 5.—What is the extent of general classification, and of individual separation of the Patients,—distinguishing sex, character of disease, degree of violence, and state of convalescence?
- 6.—What is the number of day-rooms, and their respective dimensions?
- 7.—What is the number of sleeping-rooms, and their dimensions?
- 8.—What is the number of airing-courts, and their dimensions?
- 9.—Is the separation of the sexes complete?
- 10.—Does the arrangement of the Patients' apartments, galleries, and yards, provide for their ready inspection, and afford them easy access to their galleries and courts?
- 11.—Does the plan afford facility of communication from the apartments of the superintendents and assistants to those of the Patients?
- 12.—In the construction, fittings-up, and furniture, has security against self-injury been carefully provided for throughout every part to which the Patients have access.
- 13.—Is complete ventilation effectually obtained throughout, and cold at the same time excluded.

Of the Apartments, Yards, &c. of the Patients.

- 14.—Are the day-rooms of the Patients well lighted, securely and sufficiently warmed and fitted up, and cheerful and neat in their appearance.
- 15.—Are the dormitories properly ventilated? Are the windows furnished with shutters and glazed; are they accessible to the Patients? Are the floors of these rooms or cells of hard materials, and such as do not absorb the wet? What means are taken to preserve the rooms as well as the bedding in as clean a state as may be practicable?
- 16.—Are the court-yards airy and dry; their surface well covered with turf or with small gravel, or paved: do they afford some prospect over the walls?
- 17.—Are the privies well constructed; and are there complete baths for hot and cold water?

PHYSICAL TREATMENT.

- 18.—What diet is allowed?
- 19.—Have any and what beneficial effects resulted, or been contemplated, from the adoption of such or any other diet, in any particular character of disease?
- 20.—In cases of attempt at self-starvation, what method of treatment has been adopted with most success?
- 21.—Of what portion of rest or sleep can the Patients partake; and what means are found successful in inducing sleep with restlessly inclined Patients?
- 22.—What description of clothing is provided, and at what cost?
- 23.—What steps are taken to insure the personal cleanliness of the Patients, especially of the most uncleanly?

24. How

24.—How often is bathing insisted upon generally? In what cases has bathing of any kind proved most beneficial, more especially the warm or tepid bath; what is the mode and duration of its application, &c.?

25.—Is the practice of daily and active exercise steadily insisted upon with all patients able to partake of it?

26.—Is any and what care taken to provide the Patients with sufficient warmth in severely cold weather, and to guard against accident from mortification in the infirm or bedridden?

27.—To what extent, and to what decided advantage, has medicine of any kind been practised in different species of insanity?

28.—What modes of personal coercion are in use, and on what average number of Patients is it found necessary to have recourse to it.

29.—By whose orders, and under whose superintendence, is such coercion enforced? What number of Patients is generally under coercion during the night?

30.—Are dark solitary rooms made use of with advantage in cases of violent maniacal paroxysms?

31.—How far has manual labour been adopted with advantage, and with what description of patients?

MENTAL TREATMENT.

32.—Has the active engagement of the mind to the sciences, fine arts, literature, or mechanical arts, been attempted with Patients of a superior description; and what has been the result?

33.—Where graver studies would be unsuitable, has it been found beneficial to afford Patients such employments as are calculated to engage the attention to external objects without inducing intense abstraction or exercise of mind: such, for example, as drawing, painting, designs, models, gardening, &c.?

34.—Where the mind is so diseased as to be evidently unfit for the foregoing exercises, has benefit been experienced by furnishing the Patients in their courtyards with the means of innocent amusement, from music, domestic animals, poultry, birds, flowers, and objects of a similar nature?

35.—Is any and what employment afforded to the mind, in cases of persons of inferior education?

36.—Is it the opinion of the superintendent that a state of entire indolence and mental inertness is decidedly prejudicial to the Patient?

MORAL TREATMENT.

37.—In the moral treatment of the Patients, is it considered an object of importance to encourage their own efforts of self-restraint in every possible way, by exciting and cherishing in them feelings of self-respect, by treating them with delicacy, more especially in avoiding any improper exposure of their cases before strangers in their own presence; and generally by maintaining towards them a treatment uniformly judicious and kind, sympathizing with them, and at the same time diverting their minds from painful and injurious associations?

38.—Is any religious service performed in the establishment, at which such Patients are invited, as are in a suitable state to attend? Does the physician select such Patients as attend, and in all cases approve of their attendance? Do the classes attend separately or at one time, and without distinction of mental disorder?

MISCELLANEOUS.

39.—Is it a private Establishment, a County Asylum, or an endowed and subscription Institution?

40.—In the case of a Public Asylum, how is the Committee of Management constituted, and how frequently do they attend?

41.—If an endowed or subscription Asylum, what is the nature of its foundation and mode of support?

42.—What is the payment of the Patients?

- 43.—When was the Establishment opened?
- 44.—What is the name of the superintendent?
- 45.—Is he a medical man?
- 46.—How often does the medical attendant visit the Asylum?
- 47.—How many assistants has the superintendent?
- 48.—What was the number of each sex for which the Establishment was originally designed?
- 49.—What is the present number of Patients of each sex?
- 50.—What has been the average number of Patients in the year, during the last three years; distinguishing the sexes?
- 51.—What has been the average number of cures in the year, during the last three years; distinguishing the sexes?
- 52.—What has been the proportion of relapses within the last three years; and in what description of cases have they prevailed?
- 53.—For what period of time had patients discharged cured been deranged before their admission into this Asylum?
- 54.—What has been the average number of deaths in the year, during the last three years; distinguishing the sexes?
- 55.—How were the Patients actually classed at the date of this visit? Is there any restriction as to the class of lunatics admitted; viz. are idiots, epileptic patients, or cases of long standing, excluded.
- 56.—How many patients were under coercion at the date of this visit?
- 57.—What number of Patients were in bed (in the day-time) at the date of this visit.

It is particularly requested that the following documents, &c. may be procured.

- 58.—The Rules for the government of the Asylum.
- 59.—A Plan of the Asylum and its premises, to a scale.
- 60.—Any Reports that may have been made on the state of the Asylum.
- 61.—Accounts furnishing the number of Patients admitted, cured; expense of maintenance, &c.
- 62.—Journals, or Registers of cases, explanatory of the causes of Insanity, and improved modes of treatment, and other information of a miscellaneous nature.

Appendix, N° 2.

I HAVE already stated my conviction, that most serious abuses exist in the conduct of the Houses for the reception of Pauper Lunatics in the county of Middlesex, abuses which I do not think can be effectually remedied in such houses; and I feel confident that even if abuses did not exist, it would be highly expedient to build a County Asylum under Mr. Wynn's Act, as affording peculiar advantages, particularly under the following heads—warmth in winter, ventilation, light at night, air, exercise, employment, amusement, classification, separation of each pauper at night, cleanliness, decency, safety of person, economy in annual expenses, sufficiency in the number of keepers, a paramount interest in the justices, governors, and medical officers to promote cure, exclusion of persons sought to be improperly confined, improvement in medical knowledge; a uniform, constant and vigorous superintendence by magistrates, medical men and others, solely anxious to promote the comfort of the sufferer and ultimate cure, and having no particle of counter interest.

Robert Seymour.

Portland Place,
16th June 1827.

Appendix, N^o. 3.

MINUTES OF EVIDENCE.

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Appendix, N° 3.

MINUTES OF EVIDENCE.

Jovis, 14^o die Junij, 1827.

ROBERT GORDON, ESQUIRE,
IN THE CHAIR.

Mr. Robert Browne, called in; and Examined.

Mr.
Robert Browne.

14 June 1827.

HAVE you got some Statements to deliver in to the Committee?—I have; the first of these papers is a printed statement of the pauper lunatics of the county of Middlesex, from returns made to the clerk of the peace of the county of Middlesex, showing their number, condition, and situation, for the years 1822, 1823, 1824, and 1825, inclusive; stating the parish to which they belonged, where maintained, the expense of maintenance, the number cured or discharged, and the number removed to Bethlem or any other hospital, and of those who have died, with marginal observations made by the parish as to the circumstances of some of the particular patients; and also appended to it is the numbers contained in the county asylums, with the numbers cured.—(*The Witness delivered in the same, vide No. 1.*)—No. 2 is communications received either from the rectors or the medical officers of the parishes in the county of Middlesex, in reply to a letter addressed by me, at the request of Lord Robert Seymour, inquiring the mode of management and treatment of the pauper lunatics in the licensed houses. I think I received about twenty-four answers, which are comprised in those statements. The questions asked were, “Whether any and what regulation exists in the parish for the periodical visits of the pauper lunatics?” The second question is, “What medical treatment was prescribed, and was any report made to the parish officers of the state and condition of the pauper lunatics?” The third question, “What is your opinion of the treatment and maintenance of pauper lunatics, as now adopted by the parish, as to its efficiency or inefficiency to promote cure, and the expediency of establishing a lunatic asylum for the county?”—(*The Witness delivered in the same.*)—The third series of papers consists of a list of lunatics and dangerous ideots in confinement in the houses of Messrs. Warburton and Company at Bethnal Green, being paupers of the different parishes in the county of Middlesex. This list gives the sex and ages of the patients, the parishes they belong to, the length of time they have been confined, the state of their disease, and what extra allowances have been made by the parishes for their maintenance.

[*The Witness delivered in the same, vide No. 3.*]

By whom were they made out?—Those were copied by the clerk of the peace from the returns; the others were merely answers to private communications: the first return is also taken from the answer given to the clerk of the peace by order of the magistrates.

Mr. John Hall, called in; and Examined.

Mr.
John Hall.

YOU are a guardian and director of the poor of the parish of Mary-le-bone?
—I am.

Have the goodness to state to the Committee the circumstances which induced that parish to remove their patients from the care of Mr. Warburton?—In the month of August last I paid a visit, with a brother director and guardian, the Reverend Mr. Birdwood, to the establishment at Bethnal Green called the White House: we desired to see the whole of the Mary-le-bone paupers, and we saw them all, with the exception of one male pauper, who, we were told, was in the infirmary. I should perhaps state, that they were brought down to us in the respective yards; the females first, in their yards and day rooms; the men in their yards, with the exception

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of this male pauper; he was some time making his appearance. We became at last a little impatient, and said we would walk to the infirmary: there was a little hesitation in showing us the place; but at last we discovered where it was, and we went up stairs to see this person. They were then endeavouring to bring him down; one or two persons were leading him down; he was very lame. I gained access with Mr. Birdwood into this infirmary, and there we found a considerable number of very disgusting objects—a description of pauper lunatics, I should conceive chiefly idiots, in a very small room: they were sitting on benches round the room, and several of them were chained to the wall. The air of the room was highly oppressive and offensive, insomuch so that I could not draw my breath; I was obliged to hold my breath while I staid to take a very short survey of the room.

Describe more particularly the state of the room?—It contained the description of patients called the wet patients; they were chiefly in petticoats; they are known to gentlemen in the habit of inspecting houses of this description; they appeared to be of the worst description of decided idiots; and the room was exceedingly oppressive, from the excrement and the smell which existed there. In the place where I understood the persons who were labouring under temporary illness would be, there were six or seven cribs; there were no patients occupying the cribs at that time. The discovery of this infirmary led to some conversation among the members of the poor-house board, and about the same period a man returned cured to our workhouse, who had been a considerable time at the White House, under the care of Mr. Warburton, or rather Mr. Jennings, who keeps the house, under Mr. Warburton's superintendence; on our having some conversation with this person, he led us to suppose that the patients were very much confined in the winter months, particularly on the Sundays, in their bed rooms; and that at all times in the short days they were sent to bed at a very early hour, and kept there a great many hours confined to the cribs; I mean that description of paupers who usually slept in cribs, the wet patients, as they are technically called; in consequence of this, Lord Robert Seymour, Mr. Pepys, and myself, agreed to pay an evening visit after dark to that establishment, with a view of satisfying ourselves as to the truth of the story told by the then sane patient. We accordingly proceeded to Bethnal Green, and arrived there about half-past seven or a quarter to eight in the evening on the 26th of February last; Mr. Jennings was on the spot, and we requested permission to inspect the Mary-le-bone paupers, Lord Robert stating that he was a magistrate for the county as well as a director and guardian of the poor of Mary-le-bone, and that the gentlemen with him, namely, Mr. Pepys and myself, were also directors and guardians; Mr. Jennings refused to let us see the patients; he complained of the visit at such an unseasonable hour; he said he hoped the legislature would protect houses from visits of that sort. Lord Robert looked at his watch, and it was then a quarter before eight; Mr. Jennings was pressed three or four times by Lord Robert, and at last he turned round and said, "Surely, you would not wish to see females in their beds at this time of night," making use of the term night; the answer of Lord Robert Seymour was, "show us the males." He refused positively to do so; he said he would take upon himself, in the absence of Mr. Warburton, to refuse any inspection whatever of the paupers; upon that of course we retired. The circumstance was made known at the next meeting of the Board at the Mary-le-bone workhouse, and we came to the resolution of immediately removing the paupers from the care of Mr. Warburton; I think it was at that period they sent to Mr. Warburton to say, that such a resolution had passed, and that he might, if he thought proper, attend before it was confirmed; he was invited, at any rate, before they were removed, to attend at the workhouse; he did so attend, and he certainly justified the conduct of Jennings, the person who keeps the White House, and decidedly said, that if such were to be the terms on which visits were to be paid at such unseasonable hours, he would rather give up the paupers altogether; the paupers were shortly afterwards removed, and a committee was appointed, consisting of Lord Robert Seymour, Lord Kenyon, and other members of the Board; they were removed to Sir Jonathan Miles's establishment, at Hoxton, the parties consenting to the doors being opened at any hour of the day or night.

You stated that the infirmary was in the most horrid state, and that the stench was such as to prevent your remaining in it?—I could not remain in it.

Will you state more particularly the condition in which it was, and the size of the room?—The room was not so large as this; it was an oblong room; it might be as long as this room, and perhaps as wide, taking six feet from this side.

Mr.
John Hall.

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Did it contain beds?—There might have been beds, but I do not recollect that I saw beds there; there were benches round the greater part of the room; some of those unfortunate objects were confined in manacles.

Had you ever been in that room before?—No, I never had.

Had you any reason, before you arrived there that day, to know that that room was in existence?—I had not; I believe it so happened that none of the paupers confined in that room were Mary-le-bone paupers; our visits were merely by courtesy; we had no right to inspect or see any part of the house, except that which they chose to show.

Did you understand from Mr. Birdwood, that he had ever had an opportunity in the various visits he made, of knowing of the existence of this infirmary?—Certainly not; it was perfectly new to me, and it was so offensive to him, that he retired down the stairs before I did.

You stated that the apparent objection on the part of Mr. Jennings, to admit you and Lord Robert Seymour, was the lateness of the hour; did it appear to you that all the business of the house was at an end at that hour, or did any circumstance occur which led you to believe they did not consider it too late to be carrying on the business of the house?—Certainly; we rang two or three times before we were admitted, and two or three men appeared with a coffin which they were carrying into the house; there were all the servants there, the house appeared all alive in the kitchen department; a great many assembled around us while we were talking with Mr. Jennings.

You were yourself present when Mr. Warburton was examined before the Board of Guardians?—I was.

Are the Committee to understand, that he positively refused to admit the guardians of the poor to visit the house, except within the hours named in the Act of Parliament?—I do not know whether he mentioned the Act of Parliament, but he positively refused to admit visits such as we had made, that he would not admit night visits, or improper visits as he called them.

Did he object to your visiting on the Sunday?—I do not recollect that that question was put to him.

Have you since, and previous to this period, had an opportunity of examining many convalescent lunatics belonging to the parish of Mary-le-bone?—I have had an opportunity of examining, I think, only one.

From the evidence of that pauper lunatic, were you induced to believe, that on a Sunday, the crib patients were confined to their rooms?—I met at Lord Robert Seymour's one morning, another person who corroborated that statement which had been made previously by the returned pauper.

Are the Committee to understand that your belief is, from the Saturday evening to the Monday morning, the crib patients were confined in their cribs manacled, and that they were not cleaned or removed till the Monday morning?—Decidedly so, that is my impression; I should not say, perhaps, all manacled, but a great portion, for they do not, I understand, all require it; but that those who were coerced, were so confined.

Did you ascertain from either of the patients whom you saw, the manner in which their food was administered to them during that Sunday, when they were so confined?—I do not recollect putting any questions as to the food; I recollect it was a perfect confinement from the Saturday evening to the Monday morning, and that the food was brought of course into their rooms.

Did you ascertain by whom?—No, I did not.

Did you ascertain from those patients, the manner in which they were cleaned on the Monday morning?—I understood it was no unusual thing to place the patients in tubs of cold water, and mop them down, those that had been confined during that period; and I understood from the same source, that in more than one instance, very serious injury had occurred to the health of the patients thus treated.

Were you given to understand that they were so mopped, without any reference at all to any course of medicine under which they might be then passing?—I am not aware of that circumstance, but the fact of the mopping, I have no great doubt of.

What is the name of the pauper who was in the infirmary?—I cannot recollect that his name was ever given to me.

What was the name of the convalescent that first gave you some information?—It was William Solomons.

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Mr.
John Hall.

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Was either Mr. Warburton or Mr. Jennings present upon your first examination, when the indisposition to show the infirmary, was shown?—Mr. Jennings was not present, nor Mr. Warburton.

Who was present, who appeared anxious to prevent your inquiry?—We were shown the female side by Mrs. Jennings; afterwards one of the men took us round the male yard; she was in the yard part of the time, but we were chiefly in the care of one of the keepers.

It was the keeper who was so indisposed to show you the infirmary?—They seemed to be begging for time; I cannot recollect the keeper's name.

Did you mention that circumstance to either Mr. Warburton or Mr. Jennings?—We mentioned it to Mr. Jennings, or to the keepers the very same day.

Did they state any reasons, or did they admit the fact or deny it?—I do not think any thing was stated.

Did Mr. Warburton, when he defended the conduct of Mr. Jennings, in refusing you admission so late at night, state that it would have an injurious effect on the patients?—Yes, he did; he mentioned that as one reason why it might be improper; patients in a certain state of disease.

Did he apply that to patients of all descriptions, or of a particular class?—He was asked whether he applied it in a general way, and he said, no.

Were you in the habit, previously to August last, of visiting this establishment?—I have been in the habit of going generally twice in the year.

Had you ever found any indisposition, previously to that, in the officers of the establishments in showing you the whole of the house?—We had never asked to see the whole of the building; we had only asked to see our own patients; heretofore there had been no necessity, for it so happened that the patients were not in an unhealthy state; and therefore they appeared immediately in the day rooms or the yards.

While the lunatics of the parish of Mary-le-bone were confined in Warburton's establishment at Bethnal Green, were you contented with their apparent state of health, and so forth?—Previous to this.

The complaint you allege against Mr. Warburton respects the period subsequent to the month of August last?—Yes.

Have you visited Sir Jonathan Miles's establishment since they have been placed there?—I have.

In what state are they?—Our patients are in a very improved state there, particularly the females; they have two day rooms, a large garden, I should think upwards of half an acre, exposed to the south, very airy, and they have extremely good sleeping rooms, a series of rooms that are connected with each other, and up a separate staircase, and as comfortable as patients in their situation can be.

Has any patient returned convalescent from that establishment since they were sent there?—I do not think any patient has returned with whom I have had communication.

You think Sir John Miles's establishment is conducted on proper principles, so far as cleanliness and the comfort of the lunatics is concerned?—Our paupers have been there but a very short time; on the male side we are not so well satisfied, and shall not be satisfied without some considerable alterations, if we thought that our patients were to remain there; but knowing this investigation was going on, and that it might probably terminate in a county hospital, we have been very unwilling to put Mr. Waistell, who conducts this house, to the expense of that alteration.

In what respect is the confinement of the male patients such as you do not approve?—The general objection to houses of this description would be the crowded state of them.

That is the fault you find with Sir Jonathan Miles's establishment, as far as the male lunatics are concerned?—There is a great deal more space in Sir Jonathan Miles's yard than there is in Bethnal Green, but every one who has been over Bethlem will see the great advantage of that over these private establishments.

Do you know how many persons were in the infirmary at the time you visited the patient you have referred to?—I thought at the time there might be nine or ten, but I cannot speak positively; in the infirmary, which was properly the infirmary, the room at the left, there were six or seven cribs, but there was no patients whatever in those cribs at that time.

You mentioned that certain inconvenience had arisen from mopping the patients, do you happen to know of any particular injury they have suffered?—I think a discharged patient whom I saw at Lord Robert Seymour's, mentioned the name of one

Mr.
John Hall.

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person who had been decidedly injured; the impression upon my mind is, that his health had decidedly suffered.

Do you attribute the bad state in which you found Mr. Warburton's establishment to want of space, or any defect in the system of management?—I should conceive that Mr. Warburton's establishment is decidedly deficient in point of space, and that from the state of that infirmary there was decidedly bad management; I will name a circumstance which occurred in consequence of this visit; we took no notice whatever at the workhouse of Mary-le-bone of what we had seen, but Mr. Birdwood being acquainted with Colonel Clitheroe, a magistrate of Middlesex, who has taken a very active part in the investigation of madhouses, he in a few days afterwards paid a visit with Mr. Birdwood, with a view to inspecting this very infirmary; so far from being dissatisfied with the appearance of it, every thing was in a very cleanly state; this appeared extraordinary, but the circumstance was cleared up by the pauper Webb, who explained in answer to a question I put to him, whether he recollected my visit in August, he stated, that the very day after we went, the whitewashers and people were sent in, and that room was immediately cleansed.

Do you know it to be the wish of the guardians in Mary-le-bone, that a Lunatic Asylum should be built?—I believe I may say it is the decided wish of the Board, that was their wish when first the subject was agitated.

You stated, that you had had no occasion to complain of Mr. Warburton's establishment before you visited the infirmary?—No, never.

It had never occurred to you to visit that part of the establishment before, so as to form a judgment whether his establishment was well or ill managed?—I had not ever seen that infirmary, and I believe if Mr. Jennings had been at home, I should not have seen it all.

Therefore you have no means of disapproving it?—No; the pauper lunatics looked healthy; and perhaps the Mary-le-bone paupers more healthy than the other paupers who were there; they were better clothed.

You had no means of knowing the state of the infirmary, before the visit to which you have referred?—No, I did not know of its existence till that time.

Was there any considerable proportion of the patients in that asylum with straight waistcoats on?—No, I think but few; there were a good many occasionally in muffs.

When you speak of the male infirmary having been in this dreadful state, was not the female infirmary in a much better state than most of the rooms?—Yes, it was in a very comfortable state.

Do you consider that that filth you have referred to arose out of a lengthened neglect, or the consequence of merely one day's abstinence from cleaning the room?—I think it arose from neglect in cleansing their persons, as well as cleansing the room, and I am confirmed in that opinion, because when Colonel Clitheroe went, he found it sweet in comparison; the remark I made upon the patients confined from the Saturday evening to the Monday morning, applied to the patients in the dormitories, those generally called crib patients.

Were those patients in the room to which you have referred, labouring under disease of a very unpleasant nature?—Of a very loathsome nature; extremely offensive indeed.

Did you find that the persons of the women were neglected in the same way?—In the women's infirmary, there were no parties who were so confined.

And they were much cleaner?—Yes.

The women's infirmary you found in a very good state?—Yes.

Were the females who were confined in the infirmary, affected with the same kind of symptoms as the males to whom you have referred?—No, they were not; they appeared to be labouring under casual disease.

A different description of patients?—Yes.

Were there any females labouring under the same disease as those men?—I am not aware of any; it was merely by courtesy we went over the house; we had a right only to see our own patients. I have been over the house where those in better circumstances are placed, but whether I have seen the whole of the house, I cannot say; it is a very straggling building, and it is not easy to collect the plan of the building.

Mr. William

Mr. *William Frederick Goodger*, called in; and Examined.

ARE you the apothecary attending the pauper patients for the parish of Mary-le-bone?—I am.

Have you been in the habit periodically of visiting the establishment of Mr. Warburton where those pauper patients have been confined?—I have.

How often in the course of the year?—Twelve times; we visit them monthly, and irregularly as to the time of the month.

Have the goodness to state to the Committee the manner in which you have been in the habit, and the place in which you have been in the habit of visiting those pauper patients?—I visit in company with Dr. Hooper and Mr. Phillips, the physician and the surgeon; there are generally two of us left down in a little room, and the patients are brought down to this little room to be examined as to their mind and as to their health by the two in the room, and one of us goes round the house, and we look at the beds and bedding of the different departments, and make our observations accordingly.

Have you ever been in the male infirmary?—Yes, I have been in the male infirmary within these eight months; I did not know it existed till about eight months ago.

When was the first time you knew of the male infirmary existing?—About eight months ago.

Was that in consequence of the communication of a discovery made by Mr. Birdwood and Mr. Hall?—Yes, it was communicated to me by Mr. Birdwood, and the next visiting day I directed my attention to the male infirmary, but unless casually I do not recollect knowing that there was a male infirmary existing.

You stated that two of the medical men remained below to examine the patients, and that one of the Board had been in the habit of passing through the house to examine the different rooms?—Just so.

It has been your business to take part of that duty upon yourself?—Yes, it has.

In the performance of that duty you never did examine that infirmary?—No, it escaped me, except eight months ago, since which I have visited it six times.

When you saw that infirmary, was it in its improved state or in the state in which Mr. Birdwood and Mr. Hall had originally seen it?—I considered it dissimilar to that which was represented, and in consequence that it must have been improved in the mean time.

Will you give your opinion to the Committee whether any attempt at a curative process goes on in Mr. Warburton's establishment?—Not with regard to the mind, I should conceive; it appears to me more relative to general health that the medical treatment is directed to the bodily infirmity, and not so much to the mental disease.

You consider that pauper patients, to whom your attention is confined, are sent there more as a place of safe custody than with reference to the removal of their mental disorder?—Yes, I should think so; there is some little attention paid to the mental disease, so far as this, that Dr. Hooper and Mr. Phillips may suggest a seton or they may suggest a blister to the head, and probably the medical man whose business it is to attend daily may do the same; but I do not think that is the chief aim of the institution to attend to the mental disease.

You say you were in the habit of visiting the rooms, in what state did you find the rooms and bedding when you went through the house?—I always found them very well; the beds were turned down, and I have occasionally looked into the beds and have found them clean.

Had they any information of your intention of visiting on the day next subsequent to Mr. Birdwood and Mr. Hall's visit?—No they could not know that, we did not know it ourselves till two hours before.

What space of time intervened between your arrival there and your seeing the rooms?—I think ten minutes.

Have you ever visited what are called the crib patients, those in the crib rooms?—I have seen patients on straw; but I believe what are designated crib rooms are small rooms round the landings; there are several landings and galleries on the one side or the other; there is a little closet, you open that and find straw and a crib, those are called the crib rooms; I have never seen patients in any of those rooms, and I have not always seen every one of those rooms, I have looked generally down the passage, sometimes I have opened one and sometimes another, but unless one of the patients belonging to us was placed there, I should not have thought of looking.

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Have you ever had an opportunity of inquiring of various convalescent patients, since their return from this establishment; and if so, did you ever ask any of those patients as to the manner of their treatment, and ascertain from them especially whether they were confined in those crib rooms during the Sunday?—I never asked questions, from delicacy; I was an officer myself, and did not wish to implicate the institution: had I been a director, I probably might. I did not consider it my business, and I knew there were persons who were interested in it, and would do it.

Were any observations made at the Board, when this infirmary was discovered, as to the non-examination of that infirmary before by any medical persons belonging to the parish?—Yes; I was questioned by the Board why I had not examined it; they considered me as culpable. I excused myself on that point by asserting that my attention had never been directed to the infirmary, never having had a patient there belonging to the parish of Mary-le-bone, and that I did not conceive there was a place existing, such as that described; I thought I had seen generally the whole of the house.

Blame was thrown upon you and the other medical persons for not having previously investigated the house, so as to find out the existence of that room?—There was some blame imputed to us, but I do not think it was very serious; we excused ourselves.

If you had had any knowledge of the existence of such a place as the infirmary, should you have felt yourself authorized in recommending the continuance of the Mary-le-bone patients there?—I should have felt it my duty to report it to the Board, and I think the Board probably would have taken up the idea that it was not fit they should remain there.

Are you conversant with many establishments of this nature?—No.

Are you acquainted with any other?—That at Hoxton.

Are you acquainted with any establishment where there exists a system for the treatment of mental disease?—No, I know nothing of it personally.

In the two establishments you are conversant with, mental disease is not particularly attended to?—No, I think not sufficiently well attended to.

Do you consider generally that in these establishments great space is requisite?—Yes, to admit of classification.

Greater space than exists in the two establishments with which you are acquainted?—Yes, much greater.

And that part of the defect of the system which there exists may be attributed to the want of space?—Yes, and to the want of properly classifying them; you will see a furious man, a melancholy man, and a man in epilepsy, all together.

Do you think a field or a garden attached to those establishments would be likely to contribute to the recovery of the patients?—Yes, decidedly; particularly those in a convalescent state, and probably some of the melancholy patients.

Do you consider that the engaging them in any employment would contribute to the improvement of their health?—Yes, in several things; in some it would be cruel to employ them: there are a great many cases where they would be all the better for employment.

Can you give an opinion upon the propriety or impropriety of employing convalescent patients about the persons of others who are in a more violent state of disease than themselves?—I should think that objectionable, because it requires a well regulated mind, and it requires a good temper, which very frequently they do not possess; they are liable to relapse from slight causes.

Do you see any objection to employing them in cleaning the rooms, and performing other similar offices about the house?—No; but I think their feelings ought to be in some degree consulted.

Do you think that such employment of convalescent patients about the persons of others produces an effect in retarding the recovery of the persons so employed?—Yes, I do think so; it acts in an indirect way in that respect.

Do you consider that it produces any effect on the persons about whom they are employed?—Both.

Are you aware of any cases in which convalescent patients have been continued in the establishment after their entire cure, on account of the useful services they have rendered?—No, I do not think that has occurred under our regulation; we may perhaps continue them a fortnight after they are positively sane in mind, but that is owing to an apprehension of a relapse, and we think it better to delay the time of removing them than that we should have to send them back; but I do not know

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know that they have been continued longer than is necessary in reference to their mind.

With whom is the power of discharging the patients?—The visiting medical officers.

Do you mean the medical officers of the establishment, or the medical officers of the parish?—The medical officers of the parish go there, and visit and discharge.

When it is necessary to place a patient under restraint, is it done when other patients are present?—Yes, it must be done so, for I have seen them all huddled together in a yard; occasionally one will become violent, and the keeper will go in and put on manacles.

What modes of restraint are used in establishments that you are acquainted with?—A jacket and belt, with handcuffs, and there are irons for the leg, and they chain occasionally, and straps; and I believe there is a belt they throw over them occasionally.

By a jacket, do you mean the ordinary strait waistcoat?—Yes.

Have you ever known any patients chained down in their beds?—Yes, I have; they are chained by their hands and feet, and if they were to get up in a great state of fury, they might dislocate their wrists and their ancles; I believe such an accident has occurred.

What is the longest time you have known any person continued under restraint?—I cannot answer that question, I think it depends so much upon the circumstances of the case.

Do you not conceive that the crowding together of lunatics of different classes in a confined space renders the use of methods of restraint more necessary?—Yes.

Do you not conceive that every system that produces the necessity for using modes of restraint, operates so far as an additional difficulty in the way of recovery?—Yes, certainly I think it does; there are some few exceptions, where it is beneficial to restrain them. I have seen persons, who were excessively violent, when they were put under restraint become perfectly calm, and others again have become more violent; it was absolutely necessary to restrain them, from the want of sufficient persons to take care of them.

Have you turned your attention to the proportion which ought to exist between the number of keepers and the number of lunatics?—No, I have not, for that must depend upon the kind of class the keeper has to look over; for convalescent patients probably one in forty would do, and melancholy patients perhaps one in ten, and some furious maniacs perhaps one in ten also.

How many keepers are there in the establishment at Warburton?—I was told there were fifty servants to five hundred patients.

Are the Committee to understand that those fifty persons were, in point of fact, fifty attendants, or that a certain number of those were convalescent lunatics?—I did not ascertain that; but I asked the question in a general way, and was answered that there were fifty servants to five hundred patients.

Has there been any increase to the number of servants at Warburton's in your observation during the last few months?—I never asked that question till very lately, and I think it probable there may have been an increase lately; there have been occasional questions asked as to the number of servants, and I think it very probable that they have increased their number.

Do you not think that in many patients the disease has considerably increased by the sight of persons under restraint in a more violent state of disease than themselves?—Yes.

Have you reason to believe that Doctor Hooper or Mr. Phillips were aware of the infirmary as to which you have been examined?—I am satisfied that they were not.

Veneris, 15^o die Junij, 1827.

ROBERT GORDON, ESQUIRE,

IN THE CHAIR.

Lord *Robert Seymour* being unable to attend the Committee in consequence of indisposition, the following statement having been received from him, was read :

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" Presuming that I may be considered to have formed some opinion on the state of the pauper lunatics of the county of Middlesex, as during a long period of active exertion in my several capacities of magistrate of the county, a governor of Bethlem Hospital and a director of the poor of the parish of Saint Mary-le-bone, and from my attention having been very particularly given to a consideration of the means of ameliorating the condition and treatment of these afflicted sufferers in the private madhouses of London, I take leave to submit to the Committee of the Honourable the House of Commons the following remarks :

" In page 114 of Minutes of Evidence taken before a Committee of the House in the year 1815, will be found the opinion I then gave on the treatment of the insane poor of the parish of Saint Mary-le-bone, in Mr. Warburton's licensed madhouse at Bethnal Green, and I regret to state, that with very few exceptions, no improvement has since been attempted in that establishment. It was upon the occasion of a visit made to this house in the month of June 1825, and the then very crowded appearance of the yards, &c. of that establishment, and the continued practice of the keepers permitting the female patients to lie two in a bed, that I felt it a duty incumbent upon me to call the attention of the magistracy to the subject in a published letter, in which I recommended the building a County Asylum under the authority of Mr. Wynn's Act. Circumstances, however, proving unfavourable to my prosecuting the measure that year, I set on foot inquiries in other counties of the advantages derived by the adoption of public asylums, and through Mr. Robert Browne I obtained most ample and satisfactory accounts from the several counties of Bedford, Cornwall, Gloucester, Lincoln, Lancaster, Nottingham, Norfolk, Stafford and York, which exhibited a comparison of cure, greatly exceeding that effected in the licensed houses of Middlesex, and which accounts I now beg to deliver to the Committee for their use.

" I also obtained, through the clerk of the peace, a return from all the parishes of Middlesex of the number of pauper lunatics in confinement for the years 1823, 1824 and 1825, and their disposal, which was not before known.

" These results led the appointment of a committee of the magistrates of Middlesex in January last, to inquire into the state of the parish pauper lunatics, and subsequently to the success of a motion for considering the expediency of erecting a County Lunatic Asylum, which is fixed for discussion at the ensuing July sessions.

" It was in the course of this procedure that the parish of Saint Mary-le-bone were induced to give the subject of the treatment of their pauper patients a more particular consideration, and it was at one of the meetings of the Board of Guardians and Directors of the Poor, that the fact of a male infirmary in Mr. Warburton's house, but in a most disgraceful state of neglect and filth, was first discovered by the Reverend Mr. Birdwood, then a guardian and director, which led to the knowledge that this room was not ordinarily accessible to the parochial medical visitors, or ever known to them, and which determined that Board to institute a strict inquiry, by their own members, into the condition of Mr. Warburton's house.

" It was also ascertained, by inquiry of convalescent patients then in the parish workhouse, and who had been inmates of Mr. Warburton's, that the confinement of the patients in the winter months was excessively severe, and that during the whole of Sunday the crib patients were never allowed to be taken out of their cribs.

" At the suggestion of Mr. Pepys, also a director and guardian, a nocturnal visit to Bethnal Green was determined upon; and on the 26th of February last, accompanied by that gentleman and Mr. John Hall, another guardian of the poor, we proceeded in a coach from Portland Place at about seven in the evening to Bethnal Green; we inquired for Mr. Jennings, the superintendent of the house, and demanded of him admission to the parish pauper patients of Saint Mary-le-bone, stating

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stating that we called in our capacities of guardians and directors, and with the wish to see that the paupers were properly and comfortably provided for during the night.

"Mr. Jennings refused us admission, stating, at first, that he dared not admit us. I then insisted upon my right as a magistrate, and that of my companions as parish directors and guardians, but Mr. Jennings then expostulated against our admission upon the impropriety of our seeing the females in their beds; I then stated to Mr. Jennings that we only desired to see the male patients, to satisfy ourselves that they were provided with proper bedding. It was then objected that the hour was unseasonable. I showed Mr. Jennings by my watch that it wanted a quarter of an hour to eight, and remarked that we had observed a coffin carrying into the house, which did not make it appear an unseasonable hour for some purposes. Mr. Jennings still persisted in his refusal, stating that he would take the responsibility of that refusal upon himself. Finding all hope of obtaining an entrance vain we departed, observing to Mr. Jennings that the consequence of his refusal to admit us only strengthened to confirm the accounts given to the directors by the paupers of their improper treatment during the hours of darkness.

"The result of this visit determined the directors to remove their pauper patients; and they wrote to Mr. Warburton apprizing him of this intention. Mr. Warburton attended the Board but sustained Mr. Jennings in his conduct, and informed the Board that if they required to see their patients out of the hours prescribed by the Act for regulating madhouses he should resist it, and they might remove their patients if they pleased, and positively refused any visit being made on the Sunday. The Board then came to the resolution of removing their paupers, which was done very shortly afterwards; and they are now placed at the house of Sir Jonathan Miles (kept by Mr. Waistell) under a special contract, admitting greater facilities of inspection, till a proper asylum is provided either by the county or the parish for their reception.

"I cannot conclude my statement without making a remark upon the attempts made by Mr. Warburton to render a seeming contradiction in the opinions I have given on the state of his house at different times, and upon the conduct of his servants.

"I beg to state most distinctly, that toward Mr. Warburton personally I have no hostile feeling; I have ever held but one opinion of the crowded state of the day rooms and exercising yards of his establishment as militating against all hope of cure, and I submit the advantages derived to patients from greater space and sufficient superintendence, without excessive personal restraint or coercion, cannot be better illustrated than by a comparison between the two great metropolitan establishments for this class of patients, Bethlem and St. Luke's; and that the advantage of moral treatment (by which term I mean mental and bodily employment of the patients according to their state of convalescence), will be fully and satisfactorily found by the effects produced in the different county asylums which are under magisterial inspection, and where every occupation which the former habits of the patient qualifies him for is permitted to be exercised.

"Robert Seymour."

"Portland Place, June 15th, 1827.

"To Robert Gordon, Esq. M. P. Chairman of the Committee for inquiring into the state of pauper lunatics of the county of Middlesex."

Mr. Garrett Dillon, called in; and Examined.

YOU are employed as surgeon to the parish of St. Pancras?—Yes.

In the discharge of your duty as surgeon to the parish of St. Pancras, have you been in the habit of visiting the establishments of Bethnal Green, belonging to Mr. Warburton?—I have visited the White House for upwards of six years.

Will you state, in the first place, your opinion as to the medical treatment in that establishment with regard to the cure of the patients?—With regard to the cure of derangement there is no medical treatment.

Will you have the goodness to state to the Committee your opinion of the state of the house?—My opinion of the condition of the White House is, that it is unfavourable to recovery; in fact, that it almost offers every obstacle to recovery that can well be conceived.

Will you state these obstacles?—The principal obstacles are, that there is no observance whatever as to regulation of diet; the high and the low are allowed the same description of food; in the day-time, persons labouring under every form of insanity

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insanity are in the same rooms and in the same yard ; there is no classification whatever ; some of them chained to seats, and some of them hand-cuffed ; and there are some exceedingly noisy, and others melancholy and dull, all in the same apartments, and in a yard too small for such a number, where they have not room for exercise or for employment ; there is no employment whatever which I think, as a medical man, would be very useful in curing many forms of insanity.

As a medical man, when you were attending any of the pauper patients belonging to your own parish, where did you see those pauper patients when they were sick ? —I cannot say that there is the necessary accommodation for the sick there ; I was for more than two years attending that institution before I saw the infirmary, and then it was upon the occasion of an old man named Rutlock, who was a school-master in Kentish Town ; he was confined, and I wanted to see him ; they said he was in the infirmary, and they would bring him to me ; I said I would go to him ; and after a good deal of hesitation, I was allowed to go into the infirmary ; it was a mere place for dying ; in fact it was not fit for sick persons ; that was about three years ago.

Persons were always brought to you in another apartment when you wished to see them ?—They were brought down stairs ; when I go there, my practice is to go in direct amongst the whole ; but even then I have been obliged to direct some of them to be put to bed, finding them in a dying state in the yard.

Was the infirmary, when you were admitted to it, in a disgusting state ?—Certainly so ; any thing but fit for the reception of the sick, the male infirmary ; the female was better.

Were you in the habit of seeing patients in the female infirmary ?—Yes, occasionally ; but in general there is no observance of sending them to bed when they are sick ; I scarcely ever go there that I do not find some one that is lingering about the yard in a half-dying state, that ought to be in bed. On Monday last there was a patient brought before the directors of the poor, that was sent from St. Pancras parish ten days before ; the poor man was in an exceedingly sickly state, and I mentioned that he ought to be put to bed directly ; however he was brought in to be inspected by the two magistrates who were present, and others of the directors of the poor.

How often are you in the habit of visiting that establishment for the purpose of seeing the poor belonging to your parish ?—At least once a month ; I have gone there oftener.

During the interval between those visits, by whom are those patients attended ?—They are entirely at the mercy of the keepers ; and my visit is of no use as a medical visit.

Do you mean to state that they have no medical attendance at all during the interval between your visits ?—They tell me that medical men attend there ; I have met the apothecary there from time to time, but I do not consider the medical treatment efficient ; I do not consider there is any regular system of medical treatment in that house.

Do you mean to state that if you were to visit one of your pauper patients, and found him labouring under some bodily disease, that that man will receive no further medical assistance till the return of your periodical visit ?—I can do no more when I go there ; I point out that such a man requires medical treatment ; they tell me then that this treatment will be carried into effect by the apothecary they employ ; I do not know whether it is done so or not.

Have you any reason to believe that your advice and recommendations have not been followed, and that care has not been taken of those patients whom you have pointed out as being worthy of the attention of a medical man ?—I will instance a case in which I have every reason to believe that was the case ; a man named Ferguson, belonging to St. Pancras parish, died in the White House on the 29th of April ; I saw him a fortnight before his death, and I observed to the superintendent that he was feverish ; that animal food was improper for him ; that his diet should be attended to ; that he required to be looked to by a medical man ; I had not an opportunity of seeing him again till the day before he died, that was Saturday the 28th of April, when I found him in the yard, or in the room off the yard, which is all open to the paupers, and the moment he saw me he complained that he was dying, that his head was bursting asunder ; that the noise was killing him ; and I have every reason to believe that there was nothing done in that man's case from the time that I saw him about a fortnight before his death till that time ; he died the next day.

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Did you ascertain that by asking the question, did you inquire of him whether he had any medical assistance?—No, I did not ask him the question; but I said that that man should be taken care of to Mr. Jennings, I said he ought to be bled directly, I had one of my pupils with me, and I said we will bleed him now; he said, no there is no occasion, but there is a medical man coming here that will attend to him, but he was never put to bed, he was never treated as a sick person.

Do you know any thing respecting a man of the name of Lethers?—I sent him there, I saw him before he went, and I saw him in the house; his health declined very rapidly after he went there, and I know no more than by hearsay.

When you have been upon those periodical visits to Mr. Warburton's establishment, did you ever see Mr. Warburton himself there, as if he was taking any active part in the superintendence of his establishment?—I never saw him at any period.

Can you give the Committee any information as to the efficiency or inefficiency of the visitations of those establishments by the medical board?—As far as I could ascertain from inquiry, I believe it is of no use in the case of the poor, I directed a poor man to apply to the president.

They do not examine into the case of the paupers at all?—Not that I could ascertain, and I inquired very particularly into it.

If you have any further observations to make to the Committee as to your general opinion of the state of Mr. Warburton's establishment or any other establishment in the neighbourhood with which you are acquainted, will you have the goodness to make those observations to the Committee?—My opinion is, that the private mad house system and the system adopted by the parish at present for maintaining their pauper lunatics, has not the slightest tendency to promote cure, but on the contrary, offers every barrier to cure, inasmuch as individuals, in the first accession of madness, in their first application as paupers to a parish are thrown into one of those houses where there are all the disadvantages I have already stated.

Are you not aware that there is a greater reluctance among the lower orders to send their friends or relations when in that lamentable state to Bedlam than to any other place?—I have never found it, but I have found on the contrary a great desire in those who could exercise any control to have their friends sent to Bedlam hospital.

You are aware of course that they only keep them one year at Bedlam?—Yes.

So that if the patient is not cured at the end of that year he must be sent to some of those private receptacles or returned to his family?—According to the existing state of the parish poor laws.

And you know of no place to which the overseers of the poor can possibly send those unfortunate objects but to those private receptacles?—There is no other accommodation that I know of in the county.

Are you aware how many New Bedlam would hold?—I am not.

You are probably aware that it is not ever one half filled?—I am sorry to say that I am aware of that, I have heard it; and in a letter I have written upon the subject I assign a cause for it; when this affliction happens in a poor family where they are all in one room, it is an object to get rid of the lunatic as soon as possible, and they send him to the parish house, and from the parish house he is sent away to the place where he gets admission easiest; according to the regulation of Bedlam hospital it would take three or four days or a week before they could get in, and in the interim they are sent off to a private madhouse, and they remain there; I have known cases of individuals sent to Warburton's who have died within forty-eight hours after their admission there.

Are you aware that according to the present system in the case of what is called an incurable patient, that is a patient who is not cured in a twelvemonth, there is no place to which such a pauper lunatic can be sent to but to one of those houses?—I am not aware of any other place.

You have stated that the patients in Warburton's Asylum never receive any mental improvement from the treatment they have there?—From the parochial medical officers never that I know of.

You have stated that the mental aberration is seldom or never cured by the treatment they receive at Mr. Warburton's house?—I do not think it possible that they can be cured of insanity by the treatment there.

From your inspection once a month at those houses, what can you state as to their bodily health, is that attended to properly or not?—I think not properly, they are allowed to droop about the yard till, as in the case of Ferguson, perhaps a day before their death.

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Do you conceive that in the case of Ferguson that man's life might have been saved had he received proper medical treatment?—Unquestionably.

It appears that in the year 1825, eight pauper lunatic patients died in Mr. Warburton's Lunatic Asylum belonging to the parish of Saint Pancras, do you know any of the circumstances attending the death of any of those individuals?—None that I can recollect at present, for there is no intimation given of their illness till we are sent to take away their dead body.

You say you only visit this asylum twelve times a year, may it not sometimes happen that six weeks intervene between two of your visits?—That has not happened within the last two or three years, I visit oftener than I am required by the parish to do, I have done so for my own views upon this subject, because it is nearly five years since I represented to the parish of Saint Pancras that the means used in that house were inadequate to the promotion of cure, and I begged them as an act of humanity to build wards for the temporary reception of lunatics in their own parish.

In fact you cannot state whether any medical treatment is given to those individuals provided they are taken ill at such a time as that, they do not receive medical treatment from the parish surgeon?—That I cannot say, not being present; they are entirely at their mercy; this I can say, that we never pay for any.

Can you state the agreement which the parish of Saint Pancras has made with Mr. Warburton as to taking those patients?—I do not know how the contract is made, but Mr. Warburton's bills are sent to me for inspection before they are paid, and they are headed parish of Saint Pancras to Warburton for board and lodging to such and such patients.

Then in those bills there is the same sum set down for every patient?—Yes, except in cases where there is a pint of porter ordered for such a patient, and some are allowed tobacco and some snuff.

Then those little extras are ordered by the medical officer of the parish?—Or by the physician.

Then in short they are not suggestions arising from Mr. Warburton, but they are suggestions arising from the parish of Saint Pancras?—I have known some cases where Mr. Jennings told me, we have given this person a pint of porter, but in the majority of instances it has come from either me or the directors,

When you discovered the improper state of the infirmary, did you report that to the directors of the parish?—I brought one of the directors in to see it.

Did they do any thing upon it?—No.

To your knowledge was any representation made to Mr. Warburton by any individual connected with the parish?—Not to my knowledge or belief.

Have you turned your attention a good deal to the subject of lunacy?—I have.

Is not it desirable to have a madhouse in such a situation that there may be plenty of country air, and also plenty of room for the exercise of the patients?—I think so.

Do you think, that if the patients were kept more separate, there would be greater hopes of a cure?—Unquestionably.

You are aware that many medical men differ upon that point?—I have heard persons express different opinions upon that point.

To a certain extent, solitary confinement would be the worst thing that you could resort to, would not it?—My object would be to separate the convalescents from the raging maniacs and from the idiots, and to classify them, so that men would have society in each other, undisturbed by those who are not fit society for any.

You state that the visitation of the College of Physicians is perfectly useless as to the poor?—I think so.

And that that of the directors of the parish is very little better?—Very little better as to promoting cure.

Then the only useful visitation which has existed, has been your own?—My visit and that of the directors was the same.

And you occasionally visit without them?—Yes.

Have you ever had any obstacle thrown in your way by Mr. Jennings or Mr. Warburton, in order to prevent your visitation being as effectual as it otherwise would be?—Not the slightest; they have been obliging rather, and willing to show me every part of the house I wished to see.

Do you conceive that any other visitation, except that of the medical officers of the poor, is desirable?—Yes, I think it would be useful.

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By whom?—By the friends and by the guardians of the poor, to have those visits repeated very often.

You are aware that there must be some check interposed upon the admission of friends to see the lunatics?—That is necessary in a great measure; there must be some hours regulated for the convenience of the establishment.

Do you consider it desirable that all the friends of a lunatic should at certain hours be admitted to see him?—Decidedly I think so.

Subject to no discretion except that of the medical officer?—Except where it is prohibited by the medical officer; but under the circumstances of that establishment, where there is no plan of treatment for cure, I think it would be useful.

The question rather alluded to visitation by some official person. In districts out of London, the justices of the peace have a right to visit; do you consider that any visitation by official persons of any sort beyond the medical attendant of the parish is requisite and desirable?—It would be useful on general principles, but of no use whatever towards promoting cure while the present system exists.

Would it be useful towards preventing abuses in the establishment?—It would be useful decidedly, and the oftener repeated the better.

Can you suggest by whom that visitation ought to be made, except by magistrates?—I do not know persons that you can confide in with more certainty of having your confidence well placed, than in the magistrates.

Are you aware of any objection to the magistrates being admitted at any hour of the day or night?—I should imagine there ought not to be any barrier in the way of their doing so.

Do you consider the appointment of a resident medical attendant in a house of a certain size as a very desirable measure?—I think in private madhouses, where there is private interest concerned, such an appointment would not answer the purpose fully.

For what reasons?—In this respect, that man is mortal, and liable to corruption, and though I have a very high respect for the medical profession, I should not like, if I was sending a person, to entrust him wholly to such an inspection.

What is proposed is, that there should be in every establishment of a certain size a resident medical attendant, subject to visitation by any other person besides?—That would be an immense improvement on the present system, but it would depend greatly on who that resident medical officer was dependent, whether on the proprietor of the establishment, or on the county.

Of course in a private madhouse, he must be dependent upon the proprietor of the madhouse?—Then he is his servant.

Do not you think that in private madhouses, such a regulation would be evaded by the appointment of an efficient person?—Most likely, certainly.

Do you think there is any objection to a regulation that such house should be daily visited by some medical person, though not resident within the walls?—I think it would be useful, and it should be a person not depending upon the proprietors.

Are you aware of any inconveniences that have arisen from the employment of convalescent patients as assistant keepers?—I have heard of it, but know nothing of it of my own observation.

Are you aware that is a general practice?—I believe it is.

Even in the best regulated asylums?—I cannot say as to the best regulated asylums, I can only speak to Mr. Warburton's house, and I believe the number they keep there is not sufficient; and I believe this, that those high ones that I allude to (what are called high ones are the furious maniacs), are purged, that they are lowered with drastics, for the express purpose of facilitating the cure of them.

The question relates entirely to the advantage or disadvantage of employing convalescent patients as assistants to a keeper in the care of other persons?—It must be exceedingly dangerous, inasmuch as they are liable to recurrences of the malady; they may take away the life of an individual under their care during the paroxysm.

With regard to themselves, do you think it likely to produce a bad effect upon their own recovery?—I cannot say exactly as to that.

Do you think it ever acts as a reward for good conduct, and an inducement to them to control their passions?—I should think it might have a tendency that way, but still it is a dangerous thing to trust them.

Have you ever heard that it has happened that patients are locked up to give the assistant time to attend to other persons?—Patients have told me so themselves.

Were you inclined to believe it from any further inquiries that you made into it?—Yes; from further inquiries of those that I believed.

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Do you see any objection to employing convalescent patients in every possible employment about the house, except that of personal attendance upon other lunatics?—There are employments which are not fit for convalescents, which they are not to be trusted with; but I do not see any objection to employing convalescent women in washing, that is the way they employ them there.

Supposing that in Mr. Warburton's establishment it is the custom to employ a convalescent patient as a crib room man, to have the direction and superintendence of a great number of high and wet patients confined in the crib room, do you not consider such employment to be extremely dangerous?—Extremely dangerous.

Do you not consider that such employment would also have the effect of retarding the farther advance to recovery of that convalescent patient so employed?—It might under some circumstances; the high ones might put a convalescent patient into a passion; they might excite him to such a degree that it might bring on a paroxysm again.

Therefore, supposing that system to exist in Mr. Warburton's, or any other establishment, you would consider such a system improper?—Highly objectionable.

Do you think such a system would be dangerous under the supervision of one of the servants of the establishment?—I think it would be better not to employ a convalescent at all in the care of high ones that require coercion.

In cases of a different description, might not mischief be prevented by the presence of one of the servants of the establishment?—It might be prevented certainly.

In the institution you are speaking of is there a sufficient number of attendants?—I think the number of keepers not sufficient in proportion to the number of lunatics.

Are you aware of any misconduct in the treatment of the lunatics, in consequence?—I am not aware of that.

Are not some of the best and kindest nurses in the establishment cured patients?—That I am not aware of.

Can you state how many servants belonging to Mr. Warburton are employed in his house?—No, I cannot; but I have seen three men from time to time in the male department.

That is to say, two keepers and an occasional person who acts as a groom, attending to his horses, and so forth?—Yes.

Have you any reason to believe that, independently of assistant keepers, which assistant keepers were convalescent patients, that Mr. Warburton has, in his establishment at the White House, more than three male servants?—I have no reason to believe that he had more.

How many patients were there at that time?—I cannot say exactly; I should say from 150 to 160 males, and more females.

And you do not consider that those three male keepers were sufficient to carry on the business of the house?—Certainly not.

Can you state at all the number of female keepers so employed, distinguishing the regular female servants from the convalescent patients who assist as female keepers?—I am not aware of any convalescent patients having assisted as female keepers, but I have seen three, and sometimes four women, in the female department.

What is the average number of pauper lunatics from Saint Pancras during the time you have visited?—From 35 to 38.

What proportion of those have been returned cured?—There have been perhaps three out of the whole number permanently cured; there may be more, but I do not think that there are; the most of them are incurables.

Had any of those been at Bedlam?—Some of the Saint Pancras paupers had been at Bedlam.

And turned out as incurables?—Yes.

Have you any complaint to make against the food that they give them at those places?—They are fed very well for poor persons in their situations; but I believe some of them get too much, inasmuch as they have the privilege of buying from each other; there are some that cannot eat their allowance; they are sickly, perhaps, and they have the privilege of selling it to any of the other inmates that can buy it.

What means have they of buying?—They get, perhaps, from their friends, sixpence or a shilling.

Do they live at this establishment, either better or worse, than they are accustomed to do at their own homes?—I believe they get plenty of food; there is no want of food.

You were understood to say, that the same ration of food was distributed to all patients?—Precisely.

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Is their diet in any case regulated by the medical attendant?—Not that I know of.

Do not you think that in many of those establishments there are abuses existing which could only be met by a resident superintendent of some sort, not a servant of the proprietor?—I am satisfied that even then it would be very difficult to remedy the abuses; the only means that I can see of remedying the abuses is a public hospital established on the principles of other public hospitals, where no private interests could interfere.

Is there no sort of classification of any kind at Mr. Warburton's establishment?—Nothing whatever; they are all huddled together in the yard during the daytime; I have never been in their sleeping rooms during their sleeping hours.

When you have gone to examine those patients, and had them in the room with you without the keepers, have they ever made any complaints to you of the treatment?—Very often; and on the recurrence of the malady; there is a man that I sent there ten days ago, I took him into the infirmary, and he said, "Pray, Sir, do any thing with me, but send me to the White House;" he remained with us a week, and he got well, and I discharged him; however, he went into small close apartments, and in the course of a week or two there was a recurrence of the malady, and he was sent back to our infirmary, and from the want of accommodation I was obliged to send him to the madhouse, and he is there now without any chance of getting well, as there is no effort made to restore him.

What does the parish pay per week for each lunatic?—I believe 9s.

Do you know any thing of Mr. Miles's establishment?—No.

In short, you do not know any one better than Mr. Warburton's?—I am told Mr. Warburton's is the best; our parish has chosen it as being the best; the principal error in the system originates with the parish, in the beginning, to get rid of the paupers; they send them off at once.

Have you ever seen Mr. Burrough's establishment?—Never.

Do you know any other establishment personally?—No; I believe there is great pains taken by the guardians of the poor of our parish, to choose the best, and I believe Mr. Warburton's to rank as the best.

Do you think that nine shillings a week is sufficient for the purpose, or that if you increased it a shilling or so, you could give them greater relief, considering the contracted nature of the establishment?—I do not think they would be a bit better off for the increase; the evil is in the system, and that evil begins in the parishes which send them off at once to a house of incurables.

Do not you think it would be a very desirable thing that a register should be kept in each mad house, containing the time of entrance, the age, the medical treatment, and the diet to which each patient is subjected?—That would be an improvement on the present system.

And that this should be open to the inspection of the visiting magistrates, and any medical man whom the magistrates chose to take with them?—It would be very useful, and an improvement of the present system, but it would fall short of what I think is desirable.

Would it not be almost necessary, in order that this should be done, that a medical man should be attached to the establishment, even under the direction of the proprietor?—It would be useful certainly, to have a medical man in each establishment.

Could any but a medical man, keep such a register as that?—Not of medical treatment; but again, those officers may be filled up by their personal friends.

Mr. Richard Roberts, called in; and Examined.

YOU have been for some time an assistant to the overseers and parish officers of the parish of Saint George's, Hanover-square?—I was sidesman to Lord Belgrave, the churchwarden of Saint George's, Hanover-square.

Mr.
Richard Roberts.

And you have been employed for several preceding years?—For two years previous I served the office of overseer.

Will you state the circumstances which induced you and the other persons connected with the parish of Saint George, to make a special inquiry into the state of Mr. Warburton's establishment at Bethnal Green?—It was in consequence of a report that reached the Board of Saint George, Hanover-square, from the parish of Mary-le-bone, that they were about removing their paupers from the White House at Bethnal Green, in consequence of something they had seen with which they were not satisfied; I was deputed with others, to visit the establishment of Mr. Warburton at Bethnal Green; I did so, with a particular wish to see every part of the establishment, when I went there, and saw Mr. Jennings, the superintendent; I particularly

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ticularly requested that he would show us every part of the establishment, but particularly the parts objected to by the gentlemen of Mary-le-bone. He showed us the infirmaries, the parts that had been objected to by the gentlemen of Mary-le-bone, as we understood; but at that time they did not show us all the establishment, we then only saw the parts that we had previously seen upon our former visits, and I returned to the Board and made a report accordingly, with the two other gentlemen that formed the Committee. The Board had reason to believe that our report was not correct, that is, that we had not seen what we wished to see, and having the two persons, and another whom I have now here, who had been at Bethnal Green, they were examined before the Board, and they pointed out certain parts of the establishment, which I certainly had not seen before. Upon their reporting this, we went off again immediately, before any previous notice could be given at Bethnal Green, and took those persons with us, and desired them to point out the particular places they had described to the Board; those particular places, were those crib rooms as they are called, and certainly at that time, they were in a very improper state, that is, over crowded.

How many of those rooms did you see that you had never before knowledge of the existence of?—I think five.

Were the entrances to them so situated that any person not having any previous knowledge of the existence of those rooms, might have visited Mr. Warburton's house without discovering them?—Some of them were.

How were they situated?—The entrance to the men's part particularly was in a corner, rather obscured from the light; certainly not intended to be very visible.

Will you explain what a crib-room is?—A crib-room is a place where there are nothing but wooden cribs or bedsteads; cases, in fact, filled with straw and covered with a blanket, in which those unfortunate beings are placed at night; and they sleep most of them naked on the straw, covered with a blanket.

Are those cribs intended for any particular description of patients?—They are intended, and I believe, used exclusively for those persons who are not capable of assisting themselves, and who of course do all their occasions in their crib.

Are not they technically called wet patients?—I believe they may be.

Were there other crib-rooms that you were in the habit of seeing?—Certainly; but I am in justice bound to state, that those identical rooms that I have only seen during the last year, were known to the parish officers of St. George, Hanover-square, ten or twelve years ago; how it occurs that they have escaped notice from that time to this, I am at a loss to account for; because though the present physician, Dr. James, says he never saw those rooms, yet the previous physician, Dr. Jackson, certainly had seen them, and our present vestry clerk certainly knew of them, but he never mentioned it to the Board; and I never knew of them, nor latterly, had any such places been supposed to exist.

When you and the other two members of the Board went to the establishment, did you positively call upon Mr. Jennings to show you every room and every place in the house?—Most decidedly; when he was before the Board of St. George, after we had been there he stated that he did not so understand us; but I am certain that I put the question myself distinctly to him, and the two gentlemen that accompanied me I am sure will state the same.

When you went back the second time to the establishment with the convalescent paupers that accompanied you, Mr. Jennings was not at home?—He was not.

And Mrs. Jennings being there, you insisted that you should see the whole of the establishment?—Mrs. Jennings did not object, but she asked which parts we wished to see; and we said that we did not know the parts that we wished to see, but that we wished those persons should conduct us to places that they knew, and then she desired one of the keepers to go with us, and he did so, and we then saw those places.

You have had frequent opportunities of communicating with the convalescent lunatics that have returned from that house, have you any reason to doubt that the custom in Mr. Warburton's establishment always has been to confine the crib patients from Saturday evening to Monday morning, without removing them from their cribs?—I do not know that that has always been the case, but certainly lately it has been the case; I had not heard it stated till the examination, which my duty imposed upon me within these few months; I did not know it before, but of course it has existed for some time; it is not so now I believe.

With regard to the crib-rooms that you usually saw, they were in a proper state were they.—Yes.

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With regard to the crib-rooms you had not seen till your second visit, they were in a very improper state?—The men's crib-rooms were on the ground floor, and certainly not so well aired and ventilated, and much more crowded than they ought to have been.

Were they very dirty?—Not very dirty.

Is it to the room itself, or to the attention paid to that room that you object?—The situation of the room itself, and its crowded state.

Taking those two circumstances into account, do you consider that there is any neglect in the mode of cleaning that room?—Considering the crowded state of the house I do not think they could have been cleaner than they were, particularly the second time that I went; for after those patients came to the Board I thought it a duty incumbent upon me to go again at night to see those persons after they were in their cribs, and I went thereafter eight o'clock at night and saw all those crib-rooms when the patients were in their cribs, and they then appeared to me to be in as clean a state as could be, considering the circumstances; but I should certainly say that the establishment was very much too crowded; I think the great defects are, the want, perhaps, of a sufficient number of persons to attend upon those subjects, and the crowded state of the house.

The parish of St. George's made an agreement with Mr. Warburton, that as far as their pauper lunatics were concerned, its establishment might be examined at any period of the twenty-four hours; was your visit before that agreement, or subsequent to it?—Before that, my night visit was before Mr. Warburton was at the Board, and made that agreement with the Board.

Was there any objection made to your seeing the patients?—No; the second time when I went I told Mr. Jennings that I was aware he would be summoned to the Board, and I wished to be able to give an account of those places at night, and I supposed the patients were all in bed, and I wished to see them; and he immediately took me without any hesitation, and we saw the whole, both male and female.

Then in point of fact, he made no objection to your seeing the females in bed?—No, Mrs. Jennings went with us to the female part.

He did not say that your visiting the females when they were in bed was an improper act?—No.

Was that after the removal of the patients of Mary-le-bone parish?—It was just about that time.

Will you state the size of the largest of those crib-rooms, and the number of patients in it?—I am not competent to state the size; I think there were as many as sixteen or seventeen cribs.

And as close as they could be?—They were very close; but in the female part, the crib-room contained a much greater number of cribs; but it was very long, and being at the top of the house, was well ventilated.

Were not those crib-rooms without any glass in the windows?—Down stairs they were, but I am not aware whether they were up stairs.

Did you ever visit the establishment before you went with the Board?—Yes, in a former year, when I was overseer.

Did you often visit it at that time?—We regularly visit it twice a year.

At that time you did not see the rooms that you have spoken of?—No.

You stated that the patients in the crib-rooms, when you first saw them, were in a very improper state; will you state what were the particulars that struck you as being improper?—The patients were not in the crib-rooms when I saw them, but the rooms were so crowded and ill ventilated.

Are the cribs partitioned off from one another?—No, they are mere boxes of the depth of about eighteen inches, where the person lies in; they are all fastened, some all fours, some one, some two, and some three.

Then it was only in reference to the crowded state of the rooms that you thought they were in an improper state?—Yes.

Were they clean?—They were clean, and when I went at night, I put my hand in the straw, and it was all clean.

How was it the first time?—The first time the straw was clean and dry, but the room, from the crowded state of it, was rather offensive; but when I went with Lord Calthorpe into the rooms that we had not seen before, one of the rooms was extremely offensive; that they accounted for by saying that there was a poor subject just brought in with some eruption that they had used some ointment for, that caused offence at that time.

Mr. *William Solomon*, called in; and Examined.

Mr.
William Solomon.

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YOU were some time as a patient in the establishment of Mr. Warburton, at Bethnal Green?—I was.

Can you give to the Committee any information relative to the general treatment of the patients in that establishment?—At the time I was there, I consider that the patients were treated in a very cruel manner, particularly those patients that were in the crib rooms.

Will you describe the manner in which they were treated?—They were in the habit of treating those men by chaining them down of an evening about an hour previous to dusk, in things called cribs, which are boxes containing straw, and leaving them there till the following morning locked in, without any attendance being paid to them in the course of the night, let whatever would occur; and on the Saturday evenings, they were locked down in the same state, and kept till Monday morning, without being unchained or allowed to get up to relieve themselves in any way whatever.

On the Monday morning what was done?—On the Monday morning, like the other mornings, when they got up, they were many of them in a very filthy state, and I have seen them, in the depth of winter, when the snow has been upon the ground, put into a tub of cold water and washed down with a mop; there was a man who came from Northamptonshire, who was treated in that way; I have seen that man brought from the door of the room, and from the heat of the fæces that were lying upon him, his back has been completely bare for many inches up, and he was treated in the same way by being washed in the way I have stated.

Can you give the Committee any further information as to the general treatment of persons in that establishment?—I have seen many men die in that place, I consider, from entire neglect; I will mention the case of one Wheatly, who belonged to St. George's parish; he certainly was a man who was at times very saucy, and frequently gave the keepers offence; this man gave one of the keepers offence, and he was taken into the long room, and he had a pair of handcuffs put on, and was chained, in a manner which is very generally practised there, to the side of the room; another of the patients, who acts as a keeper though he is a patient himself, came into the room, and Wheatly and he got quarrelling while he was in chains in this manner; he beat Wheatly very severely, and in the course of two or three days, Wheatly was still kept chained; he was taken very ill, lost his speech; he remained in that state for some time, and was chained down for the night in one of these cribs; at last he got into a very dangerous state, in fact he was dying, and on Tuesday morning, when Mr. Warburton was expected, he lay on the ground in the hall, and he was spoken to by one of the keepers, of the name of Barnard, and told to get up and not lie there, as his illness was all sham, that was the expression used; he did not pay any attention to him, and he was taken up in the infirmary, and he died the following evening.

During the time that you were in Mr. Warburton's establishment, had you any reason to believe that any effort was made to promote the cure of mental disorders?—Nothing more, I believe, than a very strong medicine administered to the patients that were high; it is a very strong purgative medicine, which acts very forcibly on the poor men, and some of them suffer very dreadfully from it.

Was that given indiscriminately to all?—Only to the high patients.

Which are the high patients?—The high patients are those who are placed in cribs of a night.

Are high patients and wet patients the same?—There are many patients who are subject to fits, and during the time they are under that affliction, they are not sensible of what they do, and as such they are put in those cribs, but there are many of those men that sleep there for weeks and months that never commit any offence.

Have you any reason to believe that that strong medicine has been administered on a Saturday evening to the crib patients, who were afterwards allowed to remain till the Monday morning without being removed?—That medicine is generally administered in a morning.

Have you ever been in the infirmary?—I have been in it once or twice.

Was that in a very bad state?—It was generally in a very dreadful state, till it was visited accidentally, or I should rather say by force, by two gentlemen who came from Mary-le-bone parish one afternoon without giving any notice of their intention, they walked up into the infirmary, and I believe they found it in a very dreadful

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dreadful state, and one of the men belonging to that parish died that afternoon or the following day. Colonel Clitheroe, with one of the gentlemen that had been there the previous day came to visit the infirmary, but previous to that, as early as five o'clock in the morning, this infirmary was whitewashed and cleaned out, new blankets and new coverlids put on the beds, and the place was made to appear comfortable.

When you state that it was in a very dreadful state, will you describe in what state it was?—I cannot describe it farther than the filth; I never was in it above once or twice; but I understood that when those gentlemen went up to it, they were quite affected from the stench that arose from the patients and the filth about the place.

With regard to the general care as to cleanliness, is there any attention paid to the personal cleanliness of the patients?—In the first place, there is no soap allowed in the house in that department; there were at one time very nearly 170 men in that department of the place, and one towel only was allowed, once a week, for their use and accommodation, for the whole number of persons that may happen to be there.

Can you state what is the restraint employed upon those crib patients?—They were restrained by chains; they were chained by both hands and by both legs, the greater part of them, and they remained in that state the whole of Sunday.

How were the convalescent patients employed?—They were, many of them, employed in keeping the rooms clean and making the beds, and various other avocations about the house.

Were any of them employed as assistant keepers in the care and superintendence of the high and more dangerous patients?—There were, several of them; there is one of the name of John Crutch, who I believe has had the care of some of the rooms for some years.

Was it the custom generally to appoint the convalescent patients to what is called crib-room men, or to have the superintendence of a separate crib room?—The convalescent patients have the care of the whole of the crib patients; they put them all to bed. The keepers themselves, after they are put to bed, go to see that they are all safe; but they have nothing to do with putting them to bed; and at times they are very violent, and use the poor men extremely ill.

Do you mean, that they do that without the presence of the other keepers?—I do.

Do you speak that of your own knowledge?—I speak from my own knowledge.

How long were you there?—I was there fifteen months, with the exception of three days.

You were discharged in consequence of the interposition of Mr. Dillon?—I was.

Considerable difficulties having been thrown in the way of such discharge?—Very much so.

You said that the crib patients were put into their cribs on Saturday night and not released till Monday morning, of course they must have been supplied with food?—Certainly; on the Sundays they were supplied with food by the keepers.

During the time you knew the crib rooms, were they visited by any persons in authority, such as the magistrates or the medical superintendent?—I believe that one or two of the rooms were allowed to be seen, but the whole of them I think were not; but I had not an opportunity of seeing whether those gentlemen went round the whole of the house, as in the department in which I was placed, I had only an opportunity of seeing them while they were there.

You state that the high patients were sometimes subject to fits; were those the patients that were chained down all night?—I mean, that persons that were subject to fits, were chained the same as the high patients.

And there was no attendance during the course of the night?—Not any.

So that a man in a fit in the course of the night could have no assistance?—Not any; I believe, that previous to the keepers going to bed, they occasionally go into the rooms to see that they are all safe, but they have no means of calling for any assistance if anything occurs.

Was the general demeanor of the convalescent patients who were employed as assistant keepers, kind to the other patients?—I am sorry to say that those men were extremely irritated at times; if the others gave them any insult or offence, they would treat them the same as they would treat a man that was perfectly in his senses, and I therefore think that they are not proper persons to attend upon the patients.

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Do you think that the convalescent patients who are employed as assistant keepers, treated the other patients more unkindly than the regular keepers?—Certainly I do.

Was the diet good and sufficient?—The diet was of a very common description; the bread was very good, and a very good quantity of it; but as to the other part of the diet, I cannot speak in praise of it; the meat was of the commonest description, such as stickings and clods of beef; and they had broth of what they termed the marrow bones, twice a week, which was very common fare; on Wednesdays they had a little boiled rice, and on Fridays a bit of plain pudding for dinner; they had in general water gruel, oatmeal and bread, for breakfast, unless the friends paid something extra for tea and coffee; and they had bread and cheese for supper.

Was the same diet given to every patient?—The same diet to every one.

Was it the custom of one patient to sell to another who might have the means of buying?—There were bargains of that description frequently made.

Was that with the connivance of the superintendent of the establishment?—It was without their apparent knowledge.

How often did Mr. Warburton himself inspect that part of the establishment with which you are acquainted?—They were in the habit of coming down, either the old gentleman or his son, twice a week, Tuesdays and Fridays.

Then, excepting that visit twice a week, the establishment was entirely under the superintendence of Mr. Jennings?—It was.

How often did Mr. Jennings visit the different departments of the asylum?—He was in the habit of coming in very seldom; he used to come round on a Monday morning to give money to those patients that were allowed a certain sum of money weekly; he might have come in once or twice in the course of a week besides.

Then it was not the custom either of Mr. Warburton or of Mr. Jennings to examine each department of the asylum twice a day?—It was not.

You stated that a strong purgative medicine was administered often to the patients; by whose advice was that administered?—I should think it was by the advice of Mr. Dunstan, the surgeon of the house.

Was he constantly resident at the place?—No; he came twice a week.

Do you mean regularly twice a week?—Yes.

Did he come only twice a week?—Only twice a week.

Did he come on fixed days?—He came on Tuesdays and Fridays; he always came at the same time.

How many regular keepers were there?—In this department there were two for a considerable time after I came in; but I believe when I left there were three.

How many lunatics were there at that time in the establishment?—There were at one time 164, but I believe after that they were reduced, and part of them were sent to the next house.

For the superintendence of those 164 persons there were only two regular keepers?—Yes.

Therefore the greater part of the work was done by the convalescent patients?—Yes.

Have you any reason to believe that convalescent patients were kept in that establishment after they were convalescent, because they had become useful as servants in the establishment?—I cannot say that they were kept for that purpose, but I believe they were kept for the purpose of deriving the profit which arose from them, for there are many men in that house who I feel confident are capable to be at large, and would become good members of society.

Were you ever present at some of the examinations that took place by the parish officers?—No, I never was; I believe I was placed there by the county; in fact, I never knew who placed me there. The parish officers used to come to a sort of private room; the patients went into them to see them; they would come sometimes and walk into the yard; but, in fact, my case was not known to them, and therefore I considered it of no use to speak to them. I had spoken to Mr. Dillon, and he had been kind enough to interfere for me; and I felt a confidence in him which I am happy to say has been realized.

Did those two keepers do as much as it was possible for them to do, all the work of the establishment, or did they leave particular parts of it to the convalescent patients?—The convalescent patients performed all the dirty and laborious work, the keepers merely looked over the establishment, and saw that the patients kept good order; and Mr. Barnard, one of the keepers, had the administration of the medicine to the patients, and giving them out their food and so forth, in the course of the day.

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Did the parish officers ever go through the establishment while you were there?—Several times.

When the apothecary came in his regular rounds, did he remain for any time?—He never came into the house for the purpose of going round to examine the patients; those patients that were in bad bodily health were taken into a room for him to examine.

If he had come oftener than twice a week you would have known it?—I am not certain that he did not come three times a week occasionally.

Are the Committee to understand, that, in point of fact, there was no medical examination of the patients unless they had some apparent bodily infirmity?—Not any.

Did the apothecary attend regularly upon those patients?—When he came to the house, he examined them.

Are you aware how often he came down to the house?—I think about twice a week.

As far as you yourself were concerned, you have no cause of complaint either against Mr. Jennings or Mr. Warburton?—Not any with the treatment I received, only with the confinement.

And therefore the evidence you give is with reference to the general treatment only, without reference to any grievance of your own?—Certainly.

When the health of a patient was rapidly improving, was he separated from the rest?—Yes, I believe that when a man was taken in there in a very bad state, if he improved in health and got quiet, he was removed up stairs into a bed; but in the day time they were all together.

Was there a greater degree of superintendence in any case which might be considered as one likely to turn out favourable?—Not any.

Was there any allowance of small beer?—Yes.

What quantity?—Perhaps a pint and a half a day; hardly so much as that.

Though the diet was coarse, was there plenty of it?—There was plenty of bread, but of the meat sometimes the allowance was short.

You stated that Mr. Jennings came round on Monday morning, distributing money to those who were allowed money; were they allowed to purchase any thing they pleased with that money?—They were allowed to purchase any thing they pleased; snuff or porter, or any thing of that sort.

It was allowed them by their relations?—It was.

Will you have the goodness to state by whom you were originally sent to Bethnal Green?—I was sent by the magistrate from Bow-street.

Having been sent from Brighton by Sir David Scott?—I was sent by Sir David Scott to the parish I belong to, Saint Andrew's Holborn, and when I arrived in London with one of the churchwardens, I was taken to Mr. Jones of Holborn Hill, the overseer; we had a conversation together, and he would not take any charge of me; he said that he was convinced that I was not in the state represented, and requested me to go about my business; but if I liked to go down to the committee, he would give me an answer upon the subject. I went down, and I was ordered to be discharged, and no cognizance was taken of me. In consequence of the treatment that I received at Brighton, I made an appeal to the magistrates in London, and they advised me to go to Brighton, and get relief; I called upon Sir David Scott, and requested him to give me information who it was that required the pass to pass me from Brighton to London; he told me that he could not attend to it, and he said that if I did not leave Brighton, he would have me taken up as a vagrant, and sent to Horsham gaol, and confined for three months to hard labour. I came up to London, and I was proceeding in the business, wishing to have an inquiry into the case, and on the morning of the 6th of December I was followed into my lodgings in the Waterloo Road by two Bow-street officers, who stated that Mr. Minshull had sent them, requesting that I would go to a doctor for the purpose of being examined; I accordingly went to him, as I considered the business was about to be investigated. After I had left Doctor Haslam, they took me to a public house in Long Acre, where they kept me till nine o'clock in the evening, when a pair of handcuffs was put on me, and I was brought to Mr. Warburton's house, without being allowed to send to any of my friends, or give my acquaintance a knowledge of what was become of me.

And you remained there till you were removed by the intervention of Mr. Dillon?—Yes.

Did you make any communication to your friends?—I had no opportunity of making

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making a communication to my friends, but previous to the officers bringing the handcuffs, and taking me into custody, I wrote to a friend of mine, and by that means I brought him down in the course of the day; he applied to the magistrates, and on the following day he learned what had become of me.

In Mr. Warburton's establishment, are persons allowed to hold communication with their friends?—I will give you an instance of that from Mr. Warburton himself: in February after I was sent in in December, Mr. Warburton used, when he came into the yard, to hold conversation with me, and he asked me what relatives I had; I told him that I had a father and mother (and I am sorry to say they both died while I was in confinement), and that I had a brother; and he requested me to write to my brother, and desire his attendance on the following Tuesday; I did so, and he never came: I remained expecting him every day that Dr. Warburton came, but he never came, and Mr. Warburton told me that he would write to him upon the subject. Since I have been out, I have seen my brother, and he tells me that he never received any communication upon the subject; and it appears to me as if it had been done for the purpose of irritating my mind.

How did Mr. Dillon effect your discharge?—He tells me that he applied to Bow-street respecting my case, and that the magistrates spoke rather sharply on the subject; that Mr. Minshull told him that if he thought proper to give a certificate upon the subject, he would order my discharge. Mr. Dillon did so, and they said they would not accept it without another gentleman signed it also; that gentleman was Dr. Symonds, of Dover-street, Piccadilly, who came for the express purpose of seeing me; he saw me once or twice previous to my coming out.

Then Dr. Symonds is acquainted with all the particulars of your discharge?—He is.

Is he acquainted with all the particulars of your being taken in?—Not exactly; I have never had an opportunity of laying a statement before him; in fact, I have been persuaded by Mr. Dillon to remain quiet, and not take any notice of the business at present: I have been out rather more than three months.

What is the sort of examination that you underwent before Dr. Haslam?—I was with him about half an hour; the two officers were in the room with me; he sent a letter down to Mr. Minshull, which I was not aware of the contents of.

Are you understood correctly, that you complain merely of having been taken to Mr. Warburton's, or do you complain also of the treatment you met with when there?—I have not any complaint to make of the treatment I received in the house, but the department in which I was placed; and the food I received was very different from what I had been accustomed to take, and the society was of the most dreadful nature; and the scenes that were exhibited there were hurtful to the feelings of any one.

Is it the practice in Mr. Warburton's establishment to refuse the means of communication to his patients with their friends?—I wrote at his particular request to my brother, and the letter never was sent.

Do you know of any other instances of the same description?—Many instances; I wrote another letter to Mr. Ramshaw, of Fetter-lane; he is one of the common council of the city of London, and he never received that letter. Dr. Dillon wrote a letter to me, which he sent by a person, and that was never given to me.

Were paper and pens and ink furnished whenever required?—They would, after many inquiries, furnish you with it; but if there was any thing contained in the letter that was inimical to the establishment, the letter was kept back.

How many were in the same room with yourself?—There were two rooms in which the whole of the patients were detained in the day time; there were several bed rooms; some of the rooms contained eight, ten, or twelve beds; some more.

Do you mean, that in the day time, in case the weather were not fine so that they could not go out into the yard, the crib patients and the patients of other descriptions were all in the same day room together?—They were; the crib patients were all of them chained in the day time.

But the convalescent patients were liable to the excitement of seeing high patients and violent patients in the same room with themselves?—Yes; and the most disgusting sights that man can possibly see, we were obliged to meet with at times.

Was there much disorder?—I think not, compared with the number of persons that were confined together; I think the health of the patients was upon the whole good.

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John Nettle, called in; and Examined.

HOW long were you a patient in Bethnal Green?—Sixteen months.

Were you ever put into a crib?—Yes, I was, seven months.

At what time in the evening were you generally put in there?—According to the time of the year; we went to bed about three o'clock in the afternoon, and we did not get up till about nine in the morning.

When you were put into one of the cribs were you fastened down?—I had my two hands locked in this way [*describing it*] and a large iron round my leg.

Were you ever put in there on a Saturday night and kept till Monday morning?—Yes, we were locked down at three o'clock on Saturday night, and there we laid forty-eight hours, and more than that in winter time, fastened in that way, never loose; we could hardly get our meals, indeed we had our victuals brought to us.

Were you not unloosed when your victuals were brought to you?—Certainly not; some men were locked all fours, I had only one leg locked; but some of them had both legs with a large staple fastened to the crib.

But you were confined with both arms?—Yes.

Will you state how your food was administered to you on the Sunday?—The people that were keepers of those crib rooms were the patients, and there was Mr. Dalmy and Mr. Barnard were keepers over the patients, they used to bring the food to us on the Sunday.

Who fed you?—We fed ourselves as well as we could, but nobody fed us; we had a long chain, so that we could get our hand to our mouth; but we never had a knife or fork, or any thing else to use.

While you were confined in those cribs from Saturday night till Monday morning, had you a shirt on?—Not a bit.

You were perfectly naked?—Perfectly naked.

You had only the straw and the rug?—The straw and one blanket only to cover us.

And you were left in that state in your own filth till Monday morning?—Yes.

Had you no means of moving from your crib?—We could not get out of it, we were fastened down to it.

Will you describe what took place on the Monday morning?—We did not get up till about nine o'clock, and when we got up some of the men that were locked all fours, they took them and put them in a tub, and with a mop they washed them in cold water in winter time.

You say that you were seven months a crib patient, during that time were you generally undressed and put to bed by one of the patient keepers?—We undressed ourselves, the clothes were tied up in a bundle and put upon a shelf, and the under keepers came and locked us immediately.

The crib room man was himself a patient getting well, was he not?—He was.

And this crib room man was in a certain degree answerable for all the proceedings of the room?—He was.

Did he lock you down without the attendance of either of the two keepers you have mentioned?—Yes, but they always came round and looked at us to see that every man was locked at night.

But they were not present during the time that some of the crib patients were put to bed?—No.

It was in the power therefore of those assistant keepers to ill treat you if they thought fit?—Certainly.

Did you ever know any instance of men being beat by those keepers?—Yes, I have seen a man strapped with a strap with a buckle to it; he was a bricklayer's son, and he was sent there for fits I believe.

Were you ever in the infirmary?—Yes, I was; I used to clean the windows about the house, and work about the house for the last part of my time when I was there.

What sort of state is the infirmary in?—It was more like a nuisance than any thing else; indeed I was very ill once after cleaning the windows in that infirmary; Mr. Barnard went to Mr. Jennings about it, the stench was so very bad; there was a piece of work made about it, and every thing was cleaned out of that room; about five o'clock one morning young Mr. Warburton came up and they got it all clean and comfortable by then the gentlemen came; but it was in such a state that never was seen; I turned the straw out of some of the cribs and there were maggots at the bottom of them where the sick men had laid.

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That room was all got ready cleaned and repaired previous to the arrival of some magistrates?—Yes; there were bricklayers and every thing sent for.

Did you ever know an instance of persons being brought out of that infirmary to be carried down stairs, in order to be seen by their friends or by any medical man?—Yes, some were brought down when they were dying almost, if their friends insisted upon seeing them.

They never admitted any body into that infirmary?—No, never.

You had no soap allowed, had you?—No.

If you wanted to wash your hands were there any towels or any thing of that sort?—There was a towel once a week for about 170 men, but my friends brought me soap and towels.

Did you observe that the convalescent patients that were appointed as keepers were generally more severe than the regular keepers?—They were.

Had you any allowance of snuff?—No.

Supposing a patient had asked for a little snuff, would he have been allowed it?—No, his friends must pay for it.

If his friends paid for it would he have been allowed it?—My friends paid for it for me, but I never used to get half of it.

Do you know whether the convalescent patients who acted as keepers had any reward given to them for acting in that capacity?—They had nothing except the patients that were under them gave it to them; they had nothing except they got a second dinner every day, or a lunch.

Was there any fire in the crib rooms?—Never.

Did the patients suffer much from cold?—In the winter time they did; I did very much in the winter time, I was in the biggest crib room, in the place, and there was no window to it.

Then in point of fact you were naked with no window and no fire?—Yes.

You mean that there was a place for a window but no glass?—There was no glass.

A window that was open?—It was.

Did the rain ever come in?—No, it could not very well, there was a covering over it.

How long were you in the infirmary?—I was not in the infirmary at all as a patient, but I used to go up to clean the windows.

Did you ever know of men being frost bitten in the crib rooms?—No, I cannot say that I did know that; they have had some bad chilblains.

Were you ever employed as one of the assistant keepers?—Never.

You assisted to clean the windows, and such things?—I assisted in cleaning the windows and making the beds, and such as that.

Did you find that did you good?—Yes, I did, it passed away the time.

But you never waited upon any of the other patients?—No.

Were you ever beaten?—Never but once.

Was that by a convalescent patient or by one of the keepers?—Not by one of the keepers; I saw him using a man cruelly, and I happened to speak, and he knocked me down directly.

That was a patient?—He was a patient keeper, not one of the regular keepers.

When that person did knock you down, was it during the seven months that you were so ill, or during the time when you were better?—When I was better.

Ann Gibbons, called in; and Examined.

Ann Gibbons.

HOW long were you at Mr. Warburton's house at Bethnal Green?—I was two years and ten months the last time, and I was between nine and ten weeks the first time. I went from Mount-street to Bedlam and from Bedlam to Bethnal Green, and from there I went to my brothers, and then I came back again to Mount-street.

You were the person that gave the information to the parish officers relative to the rooms that they had not discovered?—Yes.

Will you state generally what was the condition of that place?—What I saw was the poor people that were put into the cribs; they were made quite naked and put into the crib rooms; they were put to bed about four o'clock on a Saturday evening and they remained in that state till Monday morning about six, chained down.

Can you give the Committee any information as to the infirmary?—If any of the gentlemen

gentlemen belonging to the parishes came, and any of their patients were fastened in this way, they were put into a blanket and carried up stairs into the infirmary and put into one of those comfortable beds till after the gentlemen were gone, and they were brought down again and put into the crib again naked.

Did you ever see the women beat much?—No, I did not; they would take them back into the straw rooms, and after they had confined them they used to beat them, because we have heard the cries and we have heard the blows, but I have not been present to see it.

You never were an assistant keeper yourself?—No, never; they did not like me to be present, because I was apt to notice a good deal, I never had any confinement myself, I never stood in need of any.

Then you do not complain of any ill usage yourself?—No, I was not ill treated myself, but I have seen many others that were.

By convalescent keepers?—Some of them were.

Did you perceive any difference in the treatment which the patients experienced from the regular keepers and that which they received from the convalescent keepers?—The servants themselves, if any of the patients offended them, they used to fasten them down and sometimes use them very ill.

How was it with respect to the convalescent keepers?—They were sometimes in a very bad temper and sometimes they used to beat them.

In point of fact you do not think there is much difference between the conduct of the regular keepers and the convalescent patients, who were employed as keepers?—No.

How many regular keepers were there?—There were three.

Then the principal part of the duty must be done by the convalescent patients?—Yes.

Did the regular keepers ever perform those duties which were ordinarily performed by the convalescent patients?—They sometimes beat them, they used to use them very ill.

How many female patients were there?—I am not quite certain, but I think between two and three hundred.

How are the crib patients cleaned?—They were cleaned on the Monday morning after they got out of their straw.

How were they cleaned?—They used to have their clean things put on.

They were not washed in a tub?—No, they were washed in a pail, but not in a tub.

There was nothing wrong in the manner of cleaning the women?—No; I did not see any thing amiss in the way of cleaning them.

Were the women always attended by the female keepers?—No; when there was any female patients that was rather obstreperous, some of the men used to come to assist in confining them.

Were the women naked in the cribs?—Quite naked.

Did it frequently happen that men were called in upon those occasions?—Yes, sometimes it happened two or three times in the course of one week, and sometimes it did not happen more than once in two or three weeks.

Did you prefer the treatment at Bedlam to that at Bethnal Green?—It was very kind indeed at Bedlam.

Can you state any respect in which the treatment at Bedlam differed from that at Bethnal Green?—I never saw any chained and strapped all day at Bedlam, they were up every day.

Were they better cleaned and better dieted?—Yes, much better.

How did you find the diet at Bethnal Green?—It was very indifferent; any person that was quite well in health it might do very well for, but for a person that was sickly it was very indifferent.

What did the diet consist of?—On Sunday we had boiled beef; on Monday we had heads boiled; on Tuesday we had bits cut up together, and it was put into the oven and baked; and on Wednesday, we had water, and bread, and rice, and flour mixed together, and boiled with a bit of sugar to it; and on Thursday, we had bits of meat cut into small pieces and baked; on Friday we had baked pudding.

Had you any allowance of bread?—If we could not eat meat we had bread, and those who had gruel had bread crumbled into their gruel; but I never could take my gruel.

What had you in place of it?—Sometimes my friends came and brought me a little tea and sugar, and when they did not come I did without.

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What was the diet in Bedlam?—On Sunday's we had boiled beef; on Monday's we had a boiled pudding; on Tuesday's we had sometimes baked meat and sometimes boiled; on Wednesday's we had pea-soup; on Thursday's we had meat again; on Friday's we had baked pudding; and on Saturday's we had boiled rice milk.

In what respect do you think the diet at Bedlam is better than that at Bethnal Green?—Every thing we had was of the best; what we had at Bethnal Green was very common, the meat was not good; in short it was so indifferent that I could not eat it.

You mean that it consisted of coarse and bad pieces?—Yes, it was very hard.

Were you ever in any other of those establishments?—No, I never was.

Did the female patients at Mr. Warburton's suffer from cold very much?—I should think so, but I did not hear them complain; I have seen them go quite across the room when the snow has been upon the ground into their back straw rooms naked.

Was the window to the crib-room glazed?—It was a little window, what they call a bird-cage window; there was a kind of shutter that drew backward and forward.

Was there any glass?—Yes a little kind of bird-cage glass.

Was the same diet given to all patients at Bethnal Green?—It was to all the parish patients; but the privates I believe had something better.

In Bedlam was that the case?—No, any one that was sick was put upon sick diet, such as a bit of fish or a light pudding.

Then in one of those places of confinement attention was paid to diet with reference to the health of the patients, and in the other that was not the case?—Yes.

When the officers of the parish came to see you, did you ever make any complaint?—No I dare not.

Have you ever known an instance in which an individual making a complaint, was treated worse in consequence?—If their friends came to see them, and they made any complaint, they have been ill-treated when they came back again.

You know that the keepers were never present when they asked you as to the treatment?—No, they were just outside the door; they stood inside the kitchen door, which is close to the parlour; Mr. and Mrs. Jennings were always present in the kitchen when they were there.

Did you ever know them treat them ill in consequence of their making complaints?—When they made a complaint to their friends, they beat them as soon as they got them down again, and they threw them right down upon their backs, and I have seen the servants get upon them, and kneel upon them, while they were forced to take some broth down their throats.

Were those patients that would not eat or drink, except by compulsion?—I never saw them try them; I have seen that done.

Did you see Mrs. Jennings every day?—No, I did not; she had a country house somewhere by Epping Forest, and she was very frequently there; so that we were left at the mercy of the servants.

On those days, when you did not see Mrs. Jennings, did you see any body else who had the management of the establishment?—No, we did not.

Mrs. Jennings was generally absent on a Sunday, was she not?—She was.

How often did you see the medical man?—Mr. Dunstan used to come every other day.

Did the gentlemen who visited there, appear always to be expected?—They always seemed to know before they came, because they began getting their patients ready before they came.

Edward Oldham, called in; and Examined.

Edward Oldham.

HOW long were you in Mr. Warburton's establishment?—Fourteen months.

Were you ever a crib patient?—I was, two nights.

During those two nights that you were a crib patient, were you locked down both by the arms and the legs?—Yes.

Had you any opportunity of seeing the manner in which the crib patients were confined?—Yes.

Will you state the manner in which they are confined?—They are naked, and laid in the crib on the straw, and manacled by the wrist.

Were they kept in that state from Saturday night till Monday morning?—Yes.

During that time, were they still kept chained?—I should suppose they were.

Did you ever see them washed on the Monday morning?—No.

Did you ever see any of the patients ill-treated, or were you ever ill-treated yourself?—I was.

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By the assistant keepers or by the regular keepers?—By the regular keepers.

Do you mean that you have been beat and ill-used?—Yes.

Did you ever make any complaint to the gentlemen of your parish, of the manner in which you had been so ill used?—No, I did not; I was too much alarmed; I did not know who to speak to.

There was a regular Board attended the White House at different periods, why did not you complain to them of the manner in which you had been used?—While I was on the parish, I was not ill-treated; it was when I was a private patient.

You were first of all a private patient?—Yes.

And you conceive that the private patients are equally liable to ill-treatment, with the pauper patients?—By what I saw, they were more.

Was there any soap allowed in the establishment?—We were allowed to wash twice a week.

Did you see Mr. Warburton often?—I saw Mr. Warburton or his son once or twice a week.

Was Mr. Jennings very often absent?—He was.

Sabbati, 16^o die Junii, 1827.

ROBERT GORDON, ESQUIRE,

IN THE CHAIR.

John Bright, Esq. M.D. called in; and Examined.

YOU are secretary to the commissioners for regulating madhouses?—I am.

Will you give the Committee an account of the ordinary system of visits made by the commissioners?—The commissioners make a point of not going at any particular hour or any particular day or time; they assemble at the college, and from thence they visit the madhouses, as it may seem most advisable to them; they go to any certain house, and desire to see the patients; they make a point of going through the apartments of the house, and of comparing with the list which the secretary carries, the patients who are in the house. They take a general view of the condition of the patients, and any observations or any animadversions which it may occur to them to make, they do make.

They only see the patients of each madhouse once a year, do they?—They are only required by the Act to see them once a year, but they do, when occasion seems to require it, visit houses more frequently.

How frequently have you known the commissioners visit any one house?—I do not remember at this moment more than twice a year, but it is rather the practice generally with them to visit the larger establishments, particularly those in which there is a great number of pauper patients, twice in the year.

The Act of Parliament does not extend to pauper patients; do they, in point of fact, visit those houses?—They do; they conceive they are in some degree called upon to visit pauper patients; by the Act, pauper patients are excepted from being returned, but I believe the Act requires them to visit and inspect all houses.

Do you, in point of fact, visit with the commissioners all the pauper patients in those houses?—Yes, it is the object of the Commissioners so to do, to see them all; and if they find any thing worthy of reprehension, they make a minute of it; if they see any patient who appears to them to be in a state of convalescence, they signify their opinion to the keeper of the house, or they direct their secretary to write to the overseers of the parish, from which the pauper may be sent to acquaint the overseers of the state in which they find him.

Will you state to the Committee in what respects you consider the power vested in those commissioners as to visitation, defective?—They are very defective in many points; in the first place, with respect to the granting licences, there is only one day in the year, in which, according to that Act, the licences can be granted; then with respect to the persons to whom the licences may be granted, any person applying for that licence is entitled to have one; again any person committing any offence, save and except the refusing admission to commissioners on their visitation, may be continued and is continued in the exercise of such powers as that licence communicates to him, the commissioners have no power to disturb, in the management of his house,

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any keeper of a house, whatever offences he may have committed, or however unworthy he may appear to them to be; supposing any person who had, in the eyes of the commissioners acted improperly, to apply in October, at the usual and the only period in the year for granting licences, they conceive and they are advised that they are obliged to grant a licence to that individual. There is another circumstance which I think is very important, which is, the certificate which is granted; the Act is vague with respect to the medical person; it speaks of him as physician, surgeon or apothecary; it does not say, duly authorized to grant a licence, and, in point of fact, a number of persons calling themselves apothecaries, do sign certificates, and the commissioners do not believe that they can prevent their so doing, or that the signature is invalid; and again it often happens, and very improperly, as the commissioners think, that persons sign the certificate in two capacities; for instance, a medical man is or calls himself the friend of the person conveyed to the madhouse, and he signs again as a medical person; again, the keeper of a madhouse, who happens to be a medical person, signs a certificate, attesting the insanity of the party, and receives that party into his house; the commissioners always reprobate and endeavour to check such a practice, but not always successfully.

Will you proceed to state the want of any powers in the Act which has occurred to you?—I think it probable, that as to the time at which the commissioners visit there may usefully be a greater extension; at present the commissioners are limited between the hours of eight in the morning and five in the evening, and I think it would be very desirable to vest in them a power of annulling the licence in case of improper practice on the part of the person keeping the house, they have no power certainly to check otherwise than by animadversion.

Will you describe the process the commissioners take, when they enter into a house?—Their arrival is announced to the keeper, the keeper is desired to produce his certificates, he is also desired to go round the house, or to provide some person who shall go round the house with the commissioners; the secretary keeps a book, in which he has the names of the patients in that house, and he compares it with the individuals whom he actually finds there; this Committee must be pleased to observe, that the commissioners know nothing of removals; they know nothing of deaths; they are only apprized that the party has been admitted as a patient within the house; therefore, in going round, they inquire for the patients by name, and they then, and then only, learn that A. B. has been removed, being convalescent, or that he is dead, or transferred to some other house; they inquire generally, and as minutely as they can, into the accommodation of the patients, their state of bedding, and so on.

Do they see every apartment in the house?—Yes, I expect and believe that they do; they make a point of going over it very carefully.

Do they generally inquire of the keeper of that house, whether there are any rooms or apartments into which they have not been taken?—That is an inquiry often made, but it is very often rendered unnecessary by the care they exercise in going round, and which their previous knowledge of the house furnishes; if it was necessary, they would of course make it, I have no doubt.

The commissioners are not in the habit of suggesting any medical treatment, as to their bodily or mental indisposition?—If they find a patient labouring under disease other than insanity, it is not unnatural or unusual to ask what medical person is attending him, and if the answer is, no person, to suggest that immediate aid be given.

But in case their suggestions are not complied with, the commissioners have no power of enforcing them?—They have no power; the power belonging to them, is purely that of recommendation; the people keeping those houses sometimes imagine they have much greater power than they actually possess, and are disposed to listen to the suggestions they may make.

In case the Commissioners should find some supposed lunatic in those houses, whom they find to be convalescent, have they any power of immediately directing his discharge?—They have no power; the only way in which they can promote that discharge, is by writing to the friends of the patient, or if the patient is a pauper, by writing to the authorities in the parishes.

In case the parishes refuse to interfere on behalf of their pauper patients, or in case the friends of the lunatic refuse to interfere in respect of their friend, there are no immediate means by which his discharge can take place?—None whatever, that I am aware of, except the ordinary process of law; they have no power whatever, that I am aware of, under this Act.

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When the commissioners go round, do the whole of those who visit the institution, go round in a body, or do they divide the labour?—There is an occasional division of labour, sometimes one of the commissioners stays behind to examine the certificates, they generally ask for the certificates which are in the house, with which patients have been furnished since their last visitation; and it is the business of one of those gentlemen to see that those are accurate and proper.

Is it the more common course, that they divide the labour?—No, I do not think it is; I think it has frequently happened that the whole of the commissioners go round, and then look at them, unless there was a great accumulation of certificates.

In a very large house like Mr. Warburton's, it would require a great deal of time if the whole of the commissioners directed their attention to one point?—It would do so; and it is perhaps to be wished there were more frequent visitations; I do not mean with regard to that house particularly, but wherever there is a large assemblage of patients.

With respect to the pauper patients, how do you ascertain that; you see the whole of them in the house, the secretary presents a list of the names of the persons in the house, but that does not contain a list of the pauper patients?—Certainly not.

Therefore the commissioners can only learn from the keeper of the house, whether they have seen all the pauper patients?—Just so; they can only ascertain from having seen as they believe, all the rooms of the establishment, that they have seen all the paupers, but when they are very numerous, they must take somewhat on trust; the absolute number of paupers, if the number were small, they might count them.

If they did count them, what opportunity have they of ascertaining the fact, as they have no list?—If they went over a house and into every room, if the house were small, they would be tolerably certain they had seen the whole number of the patients, but they have no register, they are expressly excepted by the Acts.

You stated that the certificates had been granted sometimes by improper persons, calling themselves apothecaries, would you conceive that the commissioners were to be authorized to receive the certificates of any apothecary not regularly belonging to the Apothecary's Company?—Assuredly so; the Act is silent as to any qualification; apothecary is the designation.

Is not apothecary a known term; is any body entitled to that term but those who belong to the society?—Perhaps they ought not, but I believe the acceptance is so vague, that we cannot help receiving it; the commissioners do it with great regret.

Is not that a defect they might remedy if they adhered strictly to the law, and said they would not consider any man an apothecary who did not belong to the company?—I believe they have not power enough; they have often resorted to persons in the law for advice, and I have no doubt they would have resisted that if they could.

When the commissioners inquire as to persons, you say they sometimes find they are removed or have died, how are those facts proved to have taken place?—In some establishments they keep books, but in the majority they do not; in those we must take it upon the representation of the keepers; I think at Mr. Warburton's house and at the house of Sir Jonathan Miles, or his representatives, they have kept a ledger in which they keep a pretty accurate statement of the admissions and exits of patients.

Would not you consider it very desirable that an account should be kept of the death, and the manner and circumstances of the death?—Certainly I should think the inquiry would be highly desirable, as well as an exact register of every person in the house.

Has it ever happened to you to inquire whether, in case of any person dying, there is a separate room in which the corpse is placed?—I think in some of the larger houses that is the case, but I doubt whether that is the general provision.

Have you ever been in the infirmary?—I have.

Were you ever in the infirmary at Mr. Warburton's?—Yes, I have.

In what state did you find that?—I think, as far as I remember, the state of the females seemed more comfortable than that of the men, but the attention of the secretary in those cases is very much drawn to a comparison between the individuals and the lists.

How many hours do you spend in such a house as Mr. Warburton's?—I should think that two hours would be the minimum, perhaps about the average; sometimes a longer time would be occupied.

Are any of the commissioners in the habit of seeing the sick patients in their beds,

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beds, or are they brought down?—They generally go round, wishing, as they do, to see every room, they must by that means have an opportunity of seeing them.

They are not brought down to them?—No, I do not recollect any such circumstance.

Who are the commissioners for the present year?—Sir Henry Halford, Dr. Frampton, Dr. Young, Dr. Yates, and Dr. Macmichael.

Are they changed every year?—Part are changed every year; the two junior commissioners are generally retained two years; the senior commissioner often continues in office for three years; beyond that, by the Act, I believe he cannot.

Do you believe that within the last few years a sane man has been shut up in any of those houses as an insane one?—I cannot recollect to my recollection such a circumstance.

Do you think that could happen with the present system of inspection?—I do not think it could happen that they would be continued; that they might be admitted must be obvious to every one; for instance, at a late period of the night, a person might be taken in forcibly, as would be the case probably whether insane or sane; a certificate might be taken along with him, but I do not think in the present state of visitation such an individual would be long continued in the house.

That is supposing the visitors see every patient in the house?—Just so.

Does that always happen?—I believe it does; it is their wish and their endeavour, and my belief is that in that endeavour they are successful.

In Mr. Warburton's establishment it is supposed that rooms have been discovered which were not known to the commissioners, and had not been visited by them?—I am not aware of that.

If there were secret rooms in the establishment, persons might be kept without the knowledge of the commissioners?—Yes.

At what periods are their visitations?—The periods are irregular, and designedly irregular; there was an instance in Mr. Warburton's house, of a person who was sane being admitted, which made some noise in the newspapers.

In point of fact, what are called private patients in the establishment, unless they have friends, are not looked after so attentively as the pauper lunatics?—I do not know that I can come to that conclusion.

The pauper patients are visited by the officers of the parish, but the private patients have no visitors but the medical commissioners?—No; I think it would be a very great improvement if a clause were introduced, requiring some visit to each patient within a certain given period.

You have stated that you conceive in Mr. Warburton's establishment the visit continues for about two hours?—Yes.

It appears that at one period last year, there were in the two houses of Mr. Warburton, at Bethnal Green, 544 patients; do you mean to say that not more than two hours would be employed by the commissioners in investigating the cases of the whole of those 544 patients?—They would go round, and much would depend upon the occurrence of any case to which their attention was drawn, if they saw reason to suppose that a patient was in a state of sanity, probably a greater time would be occupied; much would depend upon the occurrence of such inquiries, which at one visit might be numerous, at another might be few.

Do you mean, that unless their attention was particularly called to any individual patient they would not bestow much time on the investigation of his case; and if their attention was so called, by whom was it to be so called; by the patient himself or the keeper?—The usual way in which the attention of the commissioners would be drawn, would be by a patient presenting himself to them, saying that he was improperly detained; that he was in a state of sanity.

Would their attention be called by those doubtful sort of certificates you have mentioned just now?—I do not know that it would particularly; I think they would look more to the cases themselves as they passed them in review.

In point of fact, the commissioners chiefly depend upon the report of the superintendent and the keepers, do they not?—No, I do not think they do; they go round, see every room, inquire into the state of the bedding and the provisions, and if their attention is called to an individual, they withdraw with him without the presence of the keeper; sometimes a few minutes conversation convinces them that the patient is a fit inmate of the house; in another case a great time may elapse before they arrive at that conclusion.

It has been stated by medical men of high authority, that on the whole they find that in the limited time they have to inquire, it is a much safer process to take the information

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information of the keepers than to investigate, it being impossible, from a few minutes conversation with a man, to ascertain his state of mind; it is not the case that they refer to the opinion of the keepers?—They naturally do; in every case they would be assisted by their own view; in ascertaining the fact much depends upon the frame of mind of the individuals composing the body; the commissioners are a fluctuating body.

How long have you been secretary?—A little more than two years.

In nineteen cases out of twenty you would probably be able to form an opinion yourself?—The cases are most of them very obvious; in some cases it is very difficult to form a correct opinion.

Have you access to the proceedings of the commissioners?—Yes, I have the custody of them.

Have the commissioners ever made any general regulations for the management of those houses?—If the question means, whether they have ever framed any code of laws by which they can be regulated, I should answer in the negative.

In turning to the fifteenth clause of the Act, in which it says that the commissioners shall, upon their visitations, if they discover any thing which in their opinion shall deserve censure or animadversion, report the same, have you seen in your experience or your reading of the proceedings of the commission, which has now existed for fifty years, any animadversions on the misconduct of any of those houses?—Yes, frequently.

Under the seventeenth clause of this Act, they are directed to make an entry of the proceedings, and to keep it locked up; do those proceedings enter fully into their observations on the condition of the house?—The commissioners enter into a rough minute book the observations which occur to them to be made, and from that minute book they are transferred into a book, which is afterwards signed by the commissioners.

Does that book contain an account of the houses which they visit?—Yes, it does.

Under the twenty-eighth clause, the keeper of one of those houses is bound to enter into a recognizance for his good behaviour?—Yes, he is.

Have you here any of those recognizances?—No, those are not entered into before the commissioners.

Is there no recognizance entered into before the commissioners grant the licence?—There is, but it is not in their presence, nor is it granted by them.

Do you know what the condition of the recognizance is?—There is a certain penalty; they are bound to be of good behaviour.

It is for general good behaviour?—I believe it is.

Have you not seen one of those recognizances?—I do not recollect that I have.

In whose custody are those recognizances?—I believe they are filed in the court, but a solicitor attends on the part of the college at the time their recognizances are entered into, and sees they are duly entered into.

Under the fourteenth clause, which gives the commissioners power to enter between the hours of eight and five, supposing the state of the house were such as to require a very lengthened examination on the part of the commissioners into any case, do you consider that Act such as that they would have to leave that house at five?—No; the Commissioners say, when we have admission we are fully entitled to continue the examination.

Then the limitations of the Act, according to the construction of the practice, is merely as to the admission before five; but they consider themselves at liberty to remain as long as is necessary for the examination?—Yes.

If the Commissioners discover any abuse they make a special report of it?—Yes, they do.

Have you ever known any report of that kind made?—The special report to be hung up was found so perfectly ineffectual, it has gone into disuse for a great many years; I have acted as commissioner for two years, and have no recollection of anything of the kind.

Have you ever known, during the time you have been a commissioner, that any steps have been taken in consequence of one of those reports having been made?—Certainly.

Can you mention any instances?—If the Committee will permit me to refer to the book I will do so—(*the Witness referred to the book*)—here is a report of proceedings in the court of King's Bench, Westminster, Budd *versus* Foulks; Doctor Budd was the treasurer of the college, in his name the prosecution was directed to be instituted.

At what date was that?—June the 12th, 1815.

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Was that suing for the penalty of the recognizance, or for one of the fines imposed by the Act?—It was for concealing and confining more than one person at a time; such person not being duly licensed.

Have you any record of any steps having been taken in consequence of reports you made on visiting licensed houses; the question respects proceedings in consequence of reports made by the commissioners of misconduct in private houses?—I do not think I can point out any; here is a case at the assizes for the county of Somerset held August 16th, 1819, of the same nature as the last.

Then no steps appear to have been taken in consequence of those reports?—I do not feel authorized to say so much.

Will you read to the Committee any report unfavourable to the madhouses which you can discover in your minutes; has any such report been made since you have been secretary?—An unfavourable report respecting a house has been made; the commissioners have in consequence visited and have reported themselves upon the case.

When did that take place?—There was one at Mr. Warburton's not very long ago.

Will you have the kindness to read that?—The one to which I refer was the case of Mrs. Elizabeth Grindall; "the commissioners inquired October 27th, 1826, for the certificate of Mrs. Elizabeth Grindall, whose case is now under the cognizance of the law; this certificate was imperfect, inasmuch as it had not the signature of a medical practitioner; it was stated that she was brought to his house by her husband, who was accompanied by the master of Saint Luke's Hospital," Mr. Stanton, he was an assistant to the master in fact.

This was only with reference to a person received without a certificate?—Yes.

Can you refer to any case in which there was a complaint of the condition of the house, or the state of the patients?—Here is a report signed by three commissioners according to the Act, of three houses of Mr. Burrow of Holly House; "This house is very much out of repair, and ill managed, and it is recommended to the commissioners to visit it soon." That was in November 1825.

[The Witness was directed to deposit the books with the clerk of the Committee for the purpose of the Committee examining them.]

Before you were secretary to the commissioners had you been a commissioner yourself?—Yes.

Do you conceive any inconvenience would arise from visiting those houses at other hours than between eight and five as at present established by law?—I do not know whether any inconvenience would arise, probably if they were disturbed in the night there might be a little excitement, which would be prejudicial to their rest.

Do you not conceive that that would be compensated by the greatest security which might be afforded in respect to their treatment at all hours of the night?—I do, certainly.

With respect to the special reports not being hung up in a conspicuous part of the College of Physicians, how long has that been discontinued?—I cannot say; longer than I can recollect.

No person can have access to those reports now, without application to you as secretary to the commissioners?—The proper way would be to apply to a commissioner, and adduce to him some reasonable ground for requiring inspection, and he authorizes the secretary to give them.

As long as that report was hung up in the hall, it was more accessible to any individual than at present?—At that time the College of Physicians was in a place not much frequented; it was found not to have that benefit which was contemplated in the Act.

It was much more convenient for a person to go at once to the College of Physicians than to go to the visiting commissioners, and then to the secretary?—That respects information impeaching a house.

In your experience, as secretary or commissioner, have you ever known any parish officers apply for information to the visiting commissioners or their secretary, as to the conduct of any particular house?—I do not think I have; I do not recollect an instance.

Did you ever know any individual apply, whether parish officer or other person, as to the character of different houses, and as to the treatment of the patients under their charge?—I have had such applications, but not with reference to parish paupers.

When were you in the infirmary at Mr. Warburton's?—I must refer to the minutes

minutes of the meeting of the commissioners—(*the Witness referred to the same*);—on the 22d of April in the present year.

There are certain persons authorized to command the commissioners to visit the madhouses whenever it shall seem to those persons in authority fit to do so; do you recollect any special visiting having been ordered by those high authorities?—No, I am not aware of that.

Can you state whether the commissioners are in the habit of visiting those houses more than once in the course of a twelvemonth?—They certainly are; it is their habitual practice with reference to the large houses.

Then when any thing particular excites their attention, their visitation is probably repeated more than twice in the course of the year?—It would be repeated in case anything which caused their animadversion continued to exist; there is one point the commissioners are always anxious about, to visit the pauper establishments at the approach of winter to see that they are properly provided with warm clothing and bedding.

Then the persons having pauper establishments are rather in expectation of a visit from the commissioners at the approach of winter?—Probably they may be.

You state that if the commissioners observed any thing incorrect as to the pauper lunatics, it was their habit to write to the overseers; is it a frequent circumstance that there are communications made to overseers?—Frequently in proportion to the necessities which arise.

Do they take any subsequent steps to see whether the overseers have done any thing on their letter?—They inquire at the next visitation, and they find generally that they have been attended to.

Is it their habit to inquire at the next visitation whether their suggestions had been carried into effect?—Yes.

You mention that they are in the habit of going at the beginning of winter for the purpose of ascertaining the degree of comfort the lunatics are likely to have, do you consider the persons called crib patients lying in straw are provided sufficiently with comfort, if it is discovered that they have but one rug to cover them?—I should conceive that to be a very inadequate provision certainly, especially at that season of the year.

Especially where there is no glass window to the room?—Yes.

If you were aware that it was the practice in any one of these houses to put the crib patients to bed on the Saturday evening and to suffer them to remain till Monday morning without removal, should you consider that an improper practice?—I should consider that if they were left there without frequent visits from their attendants, it was a very improper practice.

Are you aware that that is the practice at Mr. Warburton's house?—I am aware that has been said to be the fact, and that the Commissioners in consequence of hearing that, have thought it proper to visit the house, which they did on a day not very usual to them; namely, Sunday, thinking that they should thereby find the house more unguarded; this is a statement dated the 22d of April 1827; "A statement having appeared in the newspapers, wherein it was alleged that Mr. Jennings the superintendent of Mr. Warburton's establishment at Bethnal Green, called the White House, was in the practice of confining certain of the pauper patients in their cribs from Saturday evening till the Monday morning following; the commissioners felt it to be their duty to inquire minutely into the accuracy of such statement, and for that purpose visited the White House. Mr. Jennings on being interrogated as to the above charge, acknowledged it had been his practice occasionally to confine in the manner and for the period already mentioned, such of the pauper patients as were in a high state of excitement, or such as expressed much unwillingness to rise, but he asserted that on all such occasions the patients were taken out of their cribs on the Sunday morning and evening for the purpose of being washed and cleaned; and Mr. Jennings contended that oftentimes this practice was beneficial, inasmuch as those individuals who were highly excited and had been unable to rest during the night, by such means frequently fell into tranquil and refreshing sleep during the day. He said moreover, that this practice had not arisen from any regard to the ease of the keepers who are required to be quite as much on duty on Sunday as on any other day; Mr. Jennings observed, that he was not present at the visit of those gentlemen from whom the above charge originated; the commissioners found no patients confined in a crib, and saw no reason to be dissatisfied with the general management of the house."

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It appears from that report that this was adopted for the sake of the patients?—Yes, that was the explanation given by him.

That is Mr. Jennings's statement to the commissioners?—Yes.

That statement goes to this, that the practice was adopted for the sake of the patients?—That is his account; he disclaims any regard to the ease of the keepers.

If the practice had been adopted with reference to the security of the patients or for the sake of the patients, would it not have been equally advisable to do it on week days as well as on Sundays?—Yes, certainly.

Are you aware that it was ever adopted on any other day except Sunday?—I am not aware that it was, nor did I ever hear that it was.

Do you not think it must materially aggravate the complaint of the patients to chain them down to their beds from the Saturday evening to the Monday morning at nine o'clock?—I should think any confinement must, but without knowing the particular circumstances I cannot judge of the necessity for that confinement.

Did it always appear that they were properly supplied with food during that long interval?—It was so stated.

Do not you think that the great evil is the contracted nature of the building?—That is a very great evil; that is an evil with which the commissioners have contended for many many years; they have been urging the keepers of such houses either to take fewer patients or to enlarge their accommodations.

At the rate of 9s. per week, or somewhat higher, is it possible to have that accommodation which would tend to the recovery of the patients?—I should think that the accommodation must be very scanty if it afforded any profit, which of course is that to which the keepers look; but 9s. is overrating the amount paid at most houses.

Can you conceive any measure so likely to be beneficial as the erection of a County Asylum?—I should think, inasmuch as there would be on the spot persons devoted to the care of those unfortunate beings, as they would probably have frequent visitations of magistrates and other persons, that would be better calculated for the recovery of pauper patients.

What is your opinion of the general state of the licensed houses which you have visited, exclusive of those kept by Mr. Warburton?—I think, generally speaking, as far as my own little experience goes, and I can discover, from the perusal of these minutes, that they have been improving.

How many are there?—If the question refer to the county of Middlesex, and seven miles round, the number of licensed houses is forty eight.

Out of that number of houses, are the plans of any of them submitted to the commissioners, so that they may be quite sure they see the whole?—At the last licensing day a licence was granted to an individual who brought with her a plan of her house; I do not recollect having seen any other plan.

In those houses, how many contained regular lists of the patients within them?—I think in Mr. Warburton's and Sir Jonathan Miles's, and in the house of Mr. Burrows, there are kept ledgers, containing pretty accurate statements, one margin containing the admissions, another the removals and how the deaths have occurred, and so on; those are the most methodical.

Unless in all cases you are sure that you see the whole house, and also have a list of the patients whom you are to see in that house, it must be quite obvious it may be possible for many patients to be confined in those houses who are never seen at all?—Yes; but in the first place there is a penalty for taking in without a certificate, or for omitting to return; but the commissioners going round, they having, as they suppose, an accurate notification of the admission of each patient, are tolerably secure; I do not say that they are absolutely secure.

If they possessed those two checks of the plan of the house, and the actual number of patients, so that they might be sure they saw all the house, they might ascertain to a certainty whether they saw all the patients?—That would be sufficient if they could be sure that the plan was accurate; but the same motives that would induce them to secrete would induce them to conceal part of their house.

Have you ever made any remarks in the different houses you have visited, as to the deficiency of regular keepers?—I think that the commissioners have occasionally observed rather a deficiency of keepers, and have remarked thereupon to the proprietor of the house.

What is your opinion as to the employment of convalescent patients as keepers of others who are labouring under a greater degree of disease?—I think it is good for

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for the one party but not for the other; it is good for a convalescent, as any abstraction of the mind from a particular train is good; but as I imagine a certain salutary fear to be an important ingredient in the patient's character, that cannot exist as to a person whom a patient has seen chained perhaps only the other day.

Do you consider that that species of employment would be salutary to a convalescent patient though employment generally would be useful to him, that he should be employed in acts of coercion on a patient more furious and less advanced in convalescence than himself?—I think any employment would be advantageous, that perhaps least of all.

May it not happen, from the peculiar character of the disease, that a keeper approaching to convalescence might be found guilty of needless severity or acts of great violence towards those he was employed to watch over?—He might, I can see only that recommendation, which is only a partial one.

Do not you think their being employed in a trust is likely to create a stimulus in their minds which might be advantageous to them?—I consider that the employment is the most beneficial part of it.

William Macmichael, Esquire, M. D., called in; and Examined.

HOW long have you been employed as a commissioner?—Since last October.

Do you consider that the present Act of Parliament gives the commissioners sufficient powers?—I should think they might be rendered more efficient if the Act of Parliament were altered, but I am not able to say exactly how; for though I have read the Act of Parliament, I have not studied it very minutely.

In point of fact, have the visits you have made with the other commissioners been as effectual to promote the objects as you could wish?—I think so, certainly; we go always at a time when we are not expected; we see every part of the house; we go at all hours on any day; they can never make any preparation for our reception; we see all the beds, go into every room, and call every patient, and we state who we are, and ask them if they have any thing to complain of; and we look at all the certificates.

Have you ever visited Mr. Warburton's establishment at Bethnal Green?—Yes, I have been twice there.

Can you state to the Committee how long, or nearly how long, it took you and the commissioners to go through the whole of that establishment?—I should think two hours we must have been there.

Do you consider that two hours investigation of an establishment containing nearly 500 patients was sufficient to enable you to form any opinion as to the state of those patients, or the necessity of keeping them in that asylum?—No, I should think it not sufficient, certainly.

Then, in point of fact, the investigation of those commissioners is productive of no good as to establishing the point whether the persons ought or not to be continued in the establishment?—The propriety of continuing them in the establishment depends upon the medical certificate which we look at, and they are occasionally visited by other medical men; our superintendence is rather as to the management of the house than as to the precise points of insanity of each individual case.

With regard to the visits of the commissioners themselves, you do not consider that those visits are productive of any advantage as to determining whether the patients ought or not to be any longer continued in that establishment?—Yes; because if the persons are sufficiently sane to know who we are, and why we come, they immediately come forward and speak to us, and we listen to their story; and if we find by their story they have returned to sanity, we see the keeper instantly.

Supposing you should find that they are returned to sanity, what power have you to discharge those patients?—I should think we have not the power.

Are you aware that any person confined ever was discharged in consequence of your representations?—Having been so short a time a commissioner, I am not very familiar with the records; Doctor Bright would answer that question much better than I could: I think they might, in consequence of persuading the persons who have sent them there, and the gentleman upon whose certificate they have been admitted.

In point of fact, have you ever made such a representation?—Not since I have been a commissioner.

Have you ever had conversation with any patients professing to be cured?—Many.

With any whom you had reason to believe to be cured?—No; the most ordinary observation

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observation of them is, that they are confined improperly; but I have never had conversation with any person whom I believed, on inquiry, to be cured.

You say, on inquiry you found they had not been improperly confined; do you mean inquiry of the keepers?—No, of course we should not take the evidence of the keepers; the secretary would, if he thought a case made out, write to the person who gave the certificate originally.

Have you in many cases examined the certificates?—We always look at all the certificates; that is the first thing we do.

By whom are they generally signed?—They are signed by any medical man; an apothecary's signature is sufficient; a physician, surgeon, or apothecary.

Do the greater number of them appear to you to be signed by competent persons?—Yes, I should think so.

Are they in many cases signed by persons connected with the establishment?—No instance of that has fallen within my observation.

How long do you generally serve as commissioner?—For two years, and then we are appointed again at an interval of time; I am the junior commissioner.

Are the licences signed by all the commissioners?—The licences are signed by three commissioners; I have signed all the licences for this year.

Do you consider yourself called upon to grant a licence, whatever may be the character of the person applying?—If the person had been guilty of any impropriety the preceding year, I should conceive he would not have the licence renewed.

Are you aware of any instance of refusal?—I am not.

In your examination, is not your attention rather directed to the general character of the house than to the individual state of each patient?—Certainly.

It appears from the book produced by Doctor Bright, that the certificates have not at the period to which they refer been all examined; is that the practice now?—Every certificate is examined; for instance, it is necessary they should be signed and sealed; if there is no seal, it is observed on.

Every certificate examined?—Yes; every certificate of a new patient since the last investigation is laid upon the table, and one of the commissioners looks at it.

Do you examine the original certificates every time you visit?—Yes; we do not look over the old certificates; only those since our last visitation.

Are there fresh certificates granted at any distance of time?—No; there is no new certificate granted.

Has your attention been called particularly to the treatment of insane persons?—No, it has not.

Have you turned your attention to the benefit likely to result from the establishment of county lunatic asylums for the reception of paupers?—No, I have not.

Speaking as a medical man, should you not think that the cure of lunatics would be equally promoted by placing them under a milder system of restraint than it is possible to apply in the houses which at present exist with the numbers occupying them?—Yes, I should think so.

Sir Anthony Carlisle, called in; and Examined.

Sir A. Carlisle.

HAVE you turned your attention to the situation and state of the lunatic asylums in the neighbourhood of London?—It has happened to me in my professional duties, to have my attention occasionally called to those subjects as a public practitioner, and also from, in the course of my duty, having to visit private patients confined in private mad houses, as an anatomist and as a physiologist, and a general practitioner, I have considered it part of my duty to use my best endeavours to ascertain the causes and seeds of that unfortunate malady, and I am sorry to say, with no very great satisfaction.

Have you ever considered the present system of visitation of those asylums, by the commissioners appointed by the College of Physicians, as requiring considerable alteration?—In those houses where I have visited private patients, such as Sir Jonathan Miles's house for example, at Hoxton, I have casually seen the pauper lunatics; and at one time, I had occasion to see those who were placed in that situation in the navy department, for the lunatics belonging to the navy were specially confined at that house; from what I have seen, and from what I have met with, in conversation with the medical gentlemen who superintend that house and other similar houses, it did not appear to me that any special attention was bestowed upon either the moral or medical treatment of that class of patients, they seemed to be slovenly overlooked.

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Do you consider that the investigation, by the commissioners appointed by the College of Physicians, is effectual?—I am not a member of the College of Physicians, but being occasionally at the time of the visitations of physicians, at Sir Jonathan Miles's house, it appeared to me that it did not belong to their department, to look after the pauper lunatics, and that their attention was directed to those who were not of that class.

Did you consider that their attention being directed to other classes, it was clear that system of visitation was not effectual?—It did appear to me that in the visitation of a large establishment, the short time bestowed upon it, and the infrequency, if I may use that expression, of their calling, was very inefficient to determine upon the propriety or impropriety of the confinement of such a large number of persons; there must be a great number entirely overlooked, the examination appeared to be quite insufficient to decide upon those who ought to continue to be confined, or those who ought to be set at liberty, because in a house containing two or three hundred persons, three or four or five gentlemen going together, and remaining there two or three hours, which I believe has been generally the case, it was impossible for them to examine into the state of mind of such a number of persons whose natural character and morbid character were so exceedingly differing, it was impossible for them to gain a sufficient knowledge of the character of each individual, to determine whether he ought to continue there, or ought to be discharged, so that it must very greatly, under such visitations, depend upon the account of the person belonging to the house.

You think that the fault is inherent in the system, more than in the establishments themselves?—I think that part of the system is a very inefficient one; it is not a sufficient inspection.

Do you not apprehend that the commissioners attention is rather directed to the general character of the house, than to the individual state of each patient?—It must be so; because of the shortness of the visit, and the infrequency of it.

Will you favour the Committee with any observations which occur to you, with respect to the nature of the medical establishments for insane persons, and whether they are sufficient or otherwise, for the object for which they are designed?—It appears to me that the medical attendance of those houses called mad houses, as well as other institutions, is far too limited; that is one of the great faults of them, there is not the ability to examine all the cases, either the disease requires medical attention, or is unfit for medical attention; if it requires medical attention, from my experience in the public institution I have belonged to for five and thirty years, there is not attention bestowed upon it, for the disease is of a very peculiar kind, mixing moral and medical attention; but in the cases of lunatics, in all the public institutions I have attended, there is far less attention bestowed, less time bestowed upon the disease of the patients than in the common hospitals, where the common diseases are treated.

Would you consider it a great improvement in the state of those asylums, if there was to be a regular medical man in each establishment, containing a hundred patients?—I think there ought to be a physician or surgeon in every house containing an hundred patients, for this reason, that lunatics are especially liable to sudden diseases endangering life; they are liable to apoplexy, and to obstructions of the urine, and ruptures; if they do not get immediate relief they die; if a man is not bled within an hour of the apoplexy, the patient perishes; if something is not done instantly, the patient falls into a dangerous state, or perishes.

If there should be any establishment, in which there are confined upwards of five hundred patients without any resident medical man, and to which only occasional visits were paid by medical men, you would consider that establishment deficient in its medical appointments?—Quite improper, that would be my judgment of it.

Do you think that those five hundred patients would require much more medical attendance, than any other five hundred persons?—I am of opinion that no insane person is ever in perfect bodily health, their bodily health requires constant attention, and they are more liable to bodily errors than persons who have no mental disease, that is my judgment of them.

In point of longevity, that does not appear to be so?—I do not think that that is a criterion, because a lunatic is put under better care and management than persons at large; and if a lunatic is properly looked after, his stomach and bowels, and so on are kept in good order, but a person not so treated frequently loses his life through negligence.

With regard to the question of diet, would you not consider it a great objection

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to a medical establishment, that there was no distinction of diet between high patients and convalescent patients, between patients labouring under occasional sickness and those who were otherwise in comparative health?—I am quite convinced, from experience, that both for the moral health, that is, the remedying the derangement of the mind, and for the continuance of bodily health, diet is one of the most essential things, and that it should be specifically directed in each case, and that it requires medical direction in each case.

Do you not think it would be of great advantage in those establishments, if a register was to be kept of the process towards cure of each individual, in which the resident medical gentleman was to insert all the circumstances attending each case?—It would be very important to the medical art, to the healing art altogether, if the public were made better acquainted with the history, the progress, and the treatment of insanity; it has been kept a secret, it has been kept close, and in the hands of individuals for a purpose which it is not necessary to mention; in consequence of that there is in the medical profession generally a great want of knowledge of what is done, or what ought to be done, and the history of the case, and the progress towards cure, or the relapses and the causes which may lead to the one or the other are very insufficiently known; they are not diffused in the profession at all, but I think it would be of great importance, and it would lead to the improvement of the treatment of the disease, and certainly to a better understanding of it generally, if such reports and registers were kept and made public from time to time.

As you have stated that variety of diet is very necessary in particular cases, would you not consider variety of medicine very important?—Certainly, there can be no sweeping rule for giving medicine.

Then if it has been stated that the same medicines have been given to all the patients throughout a madhouse, do you not consider that a great error?—I think it a great medical error.

And that it might be productive of very injurious consequences?—Yes, certainly.

You consider it important that a person who may be in charge of such an institution, should be at liberty to exercise a judgment in respect to the diet to be administered to each individual patient?—Yes; were I the superintendent, and answerable to the governors of an institution of that sort, and were they, from a feeling of economy and saving, to coerce me in the treatment of a lunatic, or a set of lunatics, with regard to diet, I would say, you neither do the patient justice, nor do you permit me to exercise my judgment; their diet must be of the best kind, and not of the grossness of diet in general; it must be fresh meat, and not salt meat. In those institutions, where economy is a great matter, I have seen coarse pieces of salt beef, coarse cheese, and not the best kind of bread, and unwholesome vegetables; there is no chance of restoring a man whose disordered mind depends upon a disordered stomach and disordered bowels, if he is taking that food. If a man is kept in a state of dreaming while he is awake, for in many instances insanity consists in a man not being able to distinguish between his waking and sleeping powers; if a man's powers are asleep, he becomes a lunatic while he is awake, for most men are lunatics when they are asleep, with a disturbed state of the stomach; and if a man is thrown into that state, that he is confused while he is awake, he becomes a continued lunatic, and he has no chance. There is an operation of the mind arising from the disturbance of that function, which physic can never cure; if a man is eating that which disturbs his brain, and keeps it from that quiescence and rest which the health of the mind requires.

In that case are there not many instances of lunacy in which an allowance of 9s. a week would be extremely incompetent to procure the necessary treatment of mind and body?—I think 9s. a week would be quite insufficient.

You refer to particular cases of the disease where it arises from the stomach; what should you guess might be the average in 100 of such cases, and who, therefore, might be in all probability cured by a better treatment of the digestive organs?—I once took considerable pains on this subject, and opened the heads of those unfortunate persons, and I was greatly disappointed in not finding the seat of the disease to be in the brain; but the head of a man who has been a raving lunatic for twenty years may be opened and no disorder found in the brain, but the disorder found in the abdomen; but I would say, that where a hurt or disease or disorder exists in the brain, there is at least an equal number where it exists in the stomach; I should be of opinion from looking at the brain in so many cases, I think, that a charity for the poor would be no charity where diet was not attended to.

Generally speaking, you do not consider that in the Lunatic Asylums in the neighbourhood

neighbourhood of London any curative process is going on with regard to the pauper patients?—None at all; the disease is left to subside, and they are left to take their chance; a general inquiry is made whether the functions of the body are going on right, and I have reason to believe that sometimes they are not going on right when it is thought they are.

Have you ever considered that the situation of a Lunatic Asylum is a matter of great importance?—I think it is of very great importance, that the general health of persons under confinement should have all possible advantages; that is, that the air, the water and every thing conducive to human health should be as appropriate as possible.

Do you think it important that they should have greater space than can be found within populous towns, a garden or a farm?—I do not know; I think in some parts near London they might find places sufficiently healthy; I think when a man is in a state of convalescence he should be removed to a convalescent establishment or to his friends; if there was a public garden twenty miles off, where a man was permitted to work and to tie up seeds and so on, and auxiliary to the main establishment, it would be a most important thing, and probably it would pay itself; I merely take leave to throw out that, particularly a kitchen garden, a market garden.

Do not you think it desirable it should be attached to the main building, that persons in a certain state of convalescence might be permitted to go partly into it?—I believe there is no institution that is decently conducted where that is not permitted, even in the worst of those houses which I have the misfortune to visit.

Is it not necessary for a Lunatic Asylum to be constructed with reference to its intention, for instance, avoiding a very gloomy building?—It is necessary that the building should be well ventilated and tolerably cheerful.

You consider it desirable that there should be no more appearance of confinement than is necessary?—Yes; I should think a man in a cheerful room like this would recover much sooner than in a dark cell.

You consider the confinement of lunatics in a prison in the country very much calculated to retard their recovery?—Very much so.

Edward Wright, Esq. M. D. called in; and Examined.

YOU are the resident apothecary at Bethlem?—Apothecary and superintendent.

Will you have the goodness to state to the Committee the mode of restraint adopted in that asylum?—The modes we have are only the waistcoat, the belt and gloves, and the hobbles for the feet, a sort of strap going from ankle to ankle, but allowing the individual to walk with about a half pace.

Are you in the habit of using much restraint with regard to the patients?—Very little indeed; the report for the last week was, that seven individuals had been more or less under restraint, none of them constantly.

Out of what number?—Our present number last week was 195; but not the whole seven at one time, sometimes during the night two of them are occasionally violent, and they are both criminals.

Do you mean, that you are not in the habit of restraining more than that number of individuals even at night?—I state all the restraint used; we are obliged, by a positive regulation of the house, to report every Thursday morning every instance of restraint, if but for half an hour, to the committee then sitting; and whenever the restraint exists beyond the seven days, the physicians are obliged to report it.

Have you any instances in Bethlem of those technically called wet patients?—We have a number.

What is the treatment?—They sleep in cribs on straw, covered with blankets; the straw, by a rule of the house, is removed every morning; if a portion of dry straw remains, it is suffered to remain; but all which touched the blanket is removed every morning.

How close are those cribs placed to each other?—In a gallery of 220 or 230 feet long, there are but three and twenty beds; there are only cribs in the basement part.

How closely are the crib patients packed?—They have all separate rooms; and a gallery of 220 feet has only 23 of those.

Each crib patient has a separate room?—Yes; no two patients sleep together. I have known where a person has been very timid it has been allowed, but that does not occur twice in a twelvemonth.

That is the general practice of hospitals?—Almost the invariable practice.

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If in any establishment it should be proved, that in a room of twenty feet, sixteen or eighteen persons were confined in separate cribs during the night, you would consider that very injurious?—To me it appears very extraordinary; but then I am so situated where we have such indulgencies as we cannot expect at any private house; but I should say decidedly, that it must be unwholesome.

If it should appear that in any of those establishments those crib patients are confined in their straw, and in their beds, manacled by both arms and both legs in some instances, and in all instances by one, and are all confined from Saturday evening at three o'clock in the winter till nine on the Monday morning, without being removed from their cribs, and without being cleaned, would you not consider that extremely injurious to their health?—I can conceive a case in which it would not be improper, provided the person was kept clean.

If that were done generally, should you not consider it improper?—Yes; we have but one case where it occurs, that is the case of Andrew Harvey, a criminal lunatic; a murderer. He is not a dirty patient; he is sometimes in such a furious state as to render it necessary.

Your opinion was asked on a supposed question of practice in another establishment; if you understood such a practice to prevail, what would be your opinion of it?—That it was bad, as a general practice; it is out of the question.

Have you ever seen anything of one of those private establishments?—I have never seen any of them.

If it were the custom as to those crib patients who had been so confined from the Saturday evening till the Monday morning, on the Monday morning, and without any reference to the system of medicine under which they might be placed, to take them into a yard, in the middle of winter, and to mop them down with cold water, would you not consider that a practice highly objectionable?—I should consider it barbarous.

How much covering have the crib patients at Bethlem?—It differs in various seasons of the year; three blankets and a coverlet; we give them half a dozen, or a dozen, if they wish it.

Supposing persons so confined in those cribs during the winter in a room to which there was no glass, or where there was no mode of warming the room or regulating the temperature, with only one blanket thrown over them, and they placed in those cribs without any body clothes whatever, would you not consider that likely to aggravate their complaints?—I should consider it highly improper; the only question is, whether with such a number, how far the unwholesome breathing of that air might warm them; but I cannot consider one blanket sufficient at that season of the year.

The persons who are confined in cribs are very often those subject to furious paroxysms, are they not?—In our establishment, the dirty and the violent.

Is it your habit to leave those persons during the night without persons to watch them?—No, we have a watch during the whole night.

If you were to hear of those persons being chained down and left for the night should you think it a bad practice?—Yes, certainly; it becomes necessary to relieve them from the intolerable thirst some of them endure; and occasionally, if they are exceedingly violent, it is then necessary to undo the door, and to ascertain the fact.

Is water ever administered to any of your patients of that description during the night?—I never indiscriminately leave it; but it is one part of the duty, if they request to have their thirst slaked, that the person left supplies the drink to them; all night long this person parades through the galleries, watches lest any fire should occur, and goes in every half hour or three quarters of an hour to every part.

Do you consider that your time, as a medical man, is constantly employed in superintending the health, both bodily and mental, of the persons under your care?—I am employed from about ten in the morning till four in the afternoon in attending to them, and am only called at other hours in cases of emergency.

Would you say that if there was a private establishment containing five hundred persons, without any resident medical man, that establishment was deficient?—Decidedly so; there are many cases in which they go off into sudden fits of apoplexy, and in which a man's life might be lost if not speedily redeemed by bleeding him.

Would you not consider it a necessary part of an establishment to that extent, to have a medical man resident in the house?—That is my opinion.

With reference to servants and assistant keepers in the establishment, what proportion have you to the number of patients?—No one gallery contains more than
twenty-

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twenty-three; every gallery has one keeper, and each of the basements on the male and female sides have two; in consequence of their being dirty, and more attention being required, therefore, in the basements, they have two to twenty-three, and in the others, one to twenty-three.

Are you to be understood that those are regular keepers, or that they are convalescent patients employed as assistants?—We never employ convalescents, except that we are very happy to get them to help to clean.

You do not employ them about the persons of others?—No.

Do you consider that the employment of convalescent patients about the persons of maniacs not so far advanced to recovery, is dangerous?—I should never think of giving them any thing like a confidential employment; they do a great deal in cleaning, and in little acts of kindness, but never as superintendents of the persons of others.

If there should be an establishment where there are only two regular keepers to 160 or 170 male patients, and all the other duties are performed by convalescent lunatics, would you not consider that an improper establishment?—It is inconceivable to me; it is very improper in my opinion.

If there should be any establishment in which it has been the custom to have what is called a crib-room man to every room in which those cribs are placed, a convalescent lunatic appointed as the crib-room man, and he having the whole arrangement of undressing those crib patients and of locking them to their cribs, and that the regular keepers merely afterwards came to see that it was all right, would you not consider that an improper practice?—Decidedly bad; no individual whom it is proper to confine should be entrusted with that authority.

You would consider it wrong with reference to the person so employed as retarding his ultimate cure, and with regard to the person whom it was his business to look after?—I do not look so much to that as the impropriety of employing a person who might in a moment release or capriciously restrain another.

Do you not think it would be bad, both in the respect you mention and also in respect to the convalescent himself, that having the care of persons whom he might occasionally see in a state of fury, might derange his own mind?—I do not think it would have that effect so frequently as might be supposed.

What classification of patients have you; do you allow the furious maniac to associate with those further advanced towards convalescence?—No; we have three kinds; the criminal, the curables, and the incurables; the criminals have two separate establishments, the one at the back of the establishment for the male, and the other for the female; and there are four galleries for the males and five for the females; the upper gallery contains the incurables who are clean, and not violent; the second gallery, the convalescents; the third gallery, those not quite so far advanced; and the basement contains the violent and dirty, both curable and incurable.

Are the patients belonging to those respective galleries kept separate?—Quite separate.

If there be any establishment in which, during the day time, all the patients frequent the same room; namely, the violent maniacs, the wet patients, and those further advanced to recovery, would you consider that system as highly improper?—Highly improper; decidedly bad.

Are you aware of any inconveniences which would result from an institution being open to the inspection of persons appointed to visit it at all hours?—It would be a most wholesome regulation.

Would there be any objection on your part as a medical man from the excitement it would produce in the feelings of any of the patients, to permit visitors in authority to come to Bethlem at any period?—Certainly there ought to be no objection to the inspection of lunatics; I should say, that every investigation and inspection of the kind was much to be wished for and highly proper at any time, day or night.

From the particular nature of the establishment, you think that unless properly guarded it is liable to great abuses?—Those are matters of feeling, the house should be openly and closely inspected at all hours.

Have the goodness to state how you arrange your infirmary?—We have no infirmary, we should not take any person who was dying with consumption or labouring under palsy or apoplexy; where there is no hope of cure, if they become so either in a slight or occasional sense, we attend them in their rooms.

Do you vary their diet according to the state and condition of the patient?—Assuredly.

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If there be any establishment in which that custom is not pursued by which the same diet is given to all persons, do you hold that to be improper?—Yes, certainly.

Some of your patients are allowed to have exercise out of doors, are they not?—Yes, all unless in case of their being furious.

Do you retain the same classification in that case?—Here unfortunately we are not quite so well off.

The construction of the building of New Bethlem is as good as possible for the purpose?—It is a very good one; my opinion is that it should be a pentagon so as to command a view.

So far as air and cleanliness are concerned you have great advantages?—I believe there our institution stands unrivalled.

But still you find the inconvenience of not being able to carry the division of the airing grounds to a proper extent?—We have airing grounds, and I trust shall be enabled to do so speedily; I think it of great importance to have a sufficient quantity of airing ground.

With reference to the appearance of the building, it should not be more confined than is absolutely necessary?—Quite the contrary, open, airy and with cheering prospects; there are two or three asylums, one at Wakefield, where they have a sort of moon from which they can see the surrounding country, they hold that to be good.

With regard to the diet you think every individual ought to have his diet regulated by the circumstances of his case?—Yes.

And with the same attention as to the medicine he takes?—Yes.

Is it your opinion that no insane person is in a perfectly sound state of health?—No, I conceive there are many who are in a very sound state of health.

Do you consider that insane patients are more exposed to sudden disease than others?—I am not aware of any particular distinction.

You conceive that the body has so much to do with the mind that diet is of great importance?—I believe that insanity is as much a bodily disease as a fever or bunyon on my finger.

Do you not consider that lunatics are peculiarly liable to apoplexy and obstruction of urine?—Certainly it is one of the natural conclusions of insanity in paralysis and apoplexy, so much so, that we refuse to admit those who are paralytic or apoplectic, experience teaching us that those cases are hopeless.

Do you conceive that lunacy is ever unattended by bodily malady?—It is a disease of the brain just as much as dyspepsia of the stomach.

That sort of food which would derange the stomach of a lunatic you consider as peculiarly objectionable?—Certainly.

Would you think it proper that lunatic patients should eat salt meat so many days in the week?—Certainly not.

Supposing meat is to be had, the best meat is desirable?—Yes, we are very particular in that respect; the best meat that which is digested with the greatest facility is always given by us.

Is it possible for any person who is not constantly in communication with an insane person to pronounce whether he is fit to be discharged or not?—I should say, that those who are in the constant habit of attending the insane can detect many circumstances bearing on that point.

Will you have the goodness to detail the dietary of Bethlem?—I have not it with me, but it shall be sent.

Do you think it would be easy or possible for your steward assisted by yourself to give something like a view of what the expense would be for a pauper lunatic properly taken care of?—We could give our expense; our patients probably receive many things which they would not have in such cases.

Mr. John Thomas, called in; and Examined.

Mr.
John Thomas.

YOU are the resident apothecary to Saint Luke's?—I am.

Have the goodness to state to the Committee what is your system at Saint Luke's with regard to those patients who are called technically wet patients, as to restraint, and where they are placed at night, and their whole treatment?—They are placed generally upon straw.

Are they placed separately?—Yes, they lie on straw generally, with a blanket over them; the dirty wet patients, of whom we have about half a dozen in each gallery.

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Are they all in the same sleeping room?—No, they each of them have a separate room.

Have they only one blanket?—One blanket over the straw; but then they have from two to three, and a coverlet besides, over their persons.

Have you ever visited Bethlem?—Yes.

Is your system pretty much the same as that existing in Bethlem?—Yes, I believe it is pretty much the same.

Have you ever visited any of the private asylums where pauper lunatics are confined?—I have been at Bethnal Green, but I have never examined into them; I have made it a point not to do so, lest it should be considered inquisitive.

How long have you been connected with Saint Luke's hospital as resident apothecary?—I have been there ten years.

Do you consider it necessary to restrain patients in beds?—Frequently; in cold weather perhaps they would not be in their beds at all unless they were confined; but only by the leg, not to restrain them, and that only in a particular case.

You never leave them for six-and-thirty hours without being looked to?—They are got up every morning, and their beds cleansed, unless it is ordered by their medical attendant that they should remain in bed.

You do not confine them all the day as well as all night?—No, certainly not; I should conceive that was very detrimental to their health.

What modes of restraint have you in Saint Luke's?—We have almost all that are in use, the handcuffs, the waistcoats and muffs; and sometimes we confine them with a belt round to their hands, to prevent them tearing their clothes.

Upon the average, how many persons are restrained there in the course of a week?—We perhaps have about four or five in each gallery under restraint, but not always under restraint; they are sometimes more quiet, and then the restraint is removed; we restrain them as little as possible.

What number have you in each gallery?—About five-and-thirty; but sometimes there is not one under restraint.

Are you obliged to report the number under restraint?—No; that comes more under the moral management of them.

Is there any public record kept, by which any person could ascertain whether they were under restraint or not?—No, we have no book of that sort; they could ascertain by going round the house what number are under restraint, which they do every week.

There are no reports made to the visiting committee of the number under restraint?—No.

You stated that you have never been to visit a private establishment, because you thought it might be considered inquisitiveness; is there any such jealousy?—I have never been refused, and I have no reason to suppose I should be refused if I was to apply.

What number of patients have you at Saint Luke's?—About two hundred and seventy.

Is your time generally occupied?—Yes, it is.

There is quite enough for one medical man to do in attending to the patients in Saint Luke's?—Yes.

Do you consider that a less number would afford sufficient employment for a medical man constantly resident on the spot?—I do not know that it would; we have a surgeon and a physician besides; they are not resident.

Do they visit every day?—No, they do not; the physician visits three times a week, on Mondays, Wednesdays, and Fridays.

Are you aware of any objection that would arise from the institution being open to the inspection of authorized visitors at any hour of the day or night?—No, I am not, any further than as it would be disturbing many from their slumbers, and cause a great excitement; when the physician and myself go round, we are obliged to get from some of the patients as quickly as possible, in consequence of the excitement it produces: the number of our establishment is three hundred; we have now two hundred and seventy.

Do you conceive that in an establishment where four or five hundred patients are kept it is necessary to have a resident medical man?—I do not know, if there was one on the spot, but that might answer the purpose.

Does it not more frequently occur to patients labouring under affections of the mind, than other individuals, that they would be seized with some sudden access of complaint, which would require immediate attendance?—No, I do not know that

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they would, unless it was under apoplexy; they would require immediate attention then.

Do you consider that it would be necessary, in an establishment of that kind, to have a medical person either resident or near at hand?—Yes, certainly.

Do you conceive that each lunatic ought to be inspected every four-and-twenty hours?—I conceive it is necessary.

Is it necessary to vary the diet frequently?—No, unless they are under particular medical treatment for any derangement of their health; not so far as it respects insanity; they have the regular diet of the hospital, unless that is altered by the physician or the medical attendant, the same as in all other hospitals.

That is adapted to the case of the individual?—Yes; if it is required, we alter it for a few days at any time when it is necessary.

Lunæ, 18^o die Junii, 1827.

ROBERT GORDON, ESQUIRE,
IN THE CHAIR.

Mr.
Nathaniel Nicholls.

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Mr. Nathaniel Nicholls, called in; and Examined.

YOU are the steward of Bethlem Hospital?—I am.

Have you brought the diet table with you?—Yes, I have.

Have you been able to make out an account of the cost per head of each patient?—I have not; I am afraid it would take near a week to be able to make out such an account as would be satisfactory to myself.

What do you suppose is the expense of each person?—I suppose in our hospital it is about 40*l.* per annum; but our hospital is expressly for the cure of lunatics, and all means are devised for their cure, and that is the reason why our expenses are so large.

Is the diet of the patients the same, whether it is a person in a good state of health or otherwise?—They are all poor patients in our hospital, they must be all poor except the criminal patients.

Of course the diet varies according to the health of the patient?—All healthy patients have the same diet; I have written down what the sick diet consists of for the patients who may be attacked with fever or are of a weakly constitution.

Your calculation of 40*l.* per head includes all expenses?—Yes, repairs of the buildings, taxes and rates, and, in fact, every expense of the institution; that is but a rough calculation, it may be a few pounds lower or higher.

That does not, of course, include the original expense of the building?—No.

It includes medical attendance and medicines?—Yes; every expense except that of the management of the hospital estates. It includes also the clothing of the patients; the bedding and the furniture. Incurable patients may be kept lower than that, our hospital being for curable patients; the expense is greater than if there were no hope of their cure. The parish patients in the poor houses pay 9*s.* a week, and that with clothing amounts to 27*l.* a year. I think about sixpence per day added to that, would keep them very comfortably; that would amount to about 36*l.* a year.

You draw a great distinction between the expense of a patient who may recover, and the expense of one who is incurable?—There is some little distinction to make between the two, making a difference of some few pounds.

Does your calculation include the expense of medical officers?—Yes.

How many does your hospital contain?—We have room for two hundred and sixty.

You cannot speak as to the degree to which the expense might be diminished in the case of a common asylum?—I should say 35*l.* a year would amply suffice, and I raise my calculation from what is now paid; I think about sixpence a day each lunatic would add materially to their comforts.

In that way, for 35*l.* a head, they ought to have the best food when sick; they ought to have medical attendance by a resident apothecary, and the occasional attendance of physicians and surgeons, to be paid for such attendance?—Yes; that would be trifling as to the physician, for many would be found to do that gratuitously.

And also their clothing?—Yes.

[The

[*The Witness delivered in the Diet Table referred to by him, which was read as follows :*]

Mr.
Nathaniel Nicholls.

18 June 1827.

Bethlem Hospital.—THE PATIENTS DIET TABLE.

Monday.—Breakfast: Gruel.

Dinner: Broth of the meat boiled the preceding day, with suet puddings, four ounces of bread and one of cheese or half an ounce of butter.

Supper: Half-pound of bread, and two ounces of cheese or one ounce of butter.

Tuesday.—Breakfast: Gruel.

Dinner: Half-pound of cooked meat with vegetables, and a half-pound of bread.

Supper: Half-pound of bread and two ounces of cheese or one ounce of butter.

Wednesday.—Breakfast: Gruel.

Dinner: In the winter months, soup from the meat boiled the preceding day; legs and shins of beef, split peas, &c. &c. and a half-pound of bread.

In the summer months; broth of the meat boiled the preceding day, with baked rice puddings; four ounces of bread, and one ounce of cheese or a half ounce of butter.

Supper: Half-pound of bread, with two ounces of cheese or one ounce of butter.

Thursday.—Breakfast: Gruel.

Dinner: Half-pound of cooked meat with vegetables, and a half-pound of bread.

Supper: Half-pound of bread, with two ounces of cheese or one ounce of butter.

Friday.—Breakfast: Gruel.

Dinner: Broth of the meat boiled the preceding day, with baked batter puddings; four ounces of bread, and one ounce of cheese or half an ounce of butter.

Supper: Half-pound of bread, with two ounces of cheese or one ounce of butter.

Saturday.—Breakfast: Gruel.

Dinner: Rice milk, with half-pound of bread and two ounces of cheese or one ounce of butter.

Supper: Half-pound of bread, with two ounces of cheese or one ounce of butter.

Sunday.—Breakfast: Gruel.

Dinner: Half-pound of cooked meat, with vegetables and a half-pound of bread.

Supper: Half-pound of bread, with two ounces of bread or one ounce of butter.

At dinner each patient has daily three-quarters of a pint of table beer, and at supper the like quantity.

The extras for the sick or weakly patients consists of mutton broth, beef tea, sago, puddings, tea, eggs, wine, porter, milk, &c. &c. and whatever may be ordered by the medical officers.

The DIET TABLE recapitulated :

Breakfasts.—Gruel.

Dinners.—Mondays: Boiled suet puddings.

Tuesdays
Thursdays
Sundays } Meat with vegetables.

Wednesdays: Pease soup or baked rice puddings.

Fridays: Baked batter puddings.

Saturdays: Rice milk.

Suppers.—Bread with butter or cheese.

Nath. Nicholls, Steward.

Bethlem Hospital, 18th June 1827.

Mr. Stephen Watts, called in; and Examined.

*Mr.
Stephen Watts.*

18 June 1827.

YOU are clerk to the directors of the poor for the parish of Mary-le-bone?—
I am.

Will you produce the contract with Mr. Warburton for the support of the pauper lunatics?—We have no such contract, it is merely verbal.

Is that verbal contract entered in the minutes of the vestry?—Yes, it is.

Have you brought an extract from the vestry book of those minutes?—No, I have not.

Can you state the nature of the contract?—On the 26th of September, in the year 1800, Mr. Stratton having been lately deceased, Mr. Warburton took the house and business, and applied to the directors and guardians to continue their paupers at that house, which they did. They agreed with him that they should remain, and where they have remained till lately.

At what rate?—It was at nine shillings a week; that has been altered several times, according to the price of provisions; it was once as high as ten shillings, then it was reduced to nine shillings, then ten again, and now it has been nine shillings for three years past.

What does that nine shillings a week include?—Meat and drink, lodging and every thing but clothing and medicine.

Does he make an extra charge for such medicines as he administers to your patients?—Every quarter.

Can you state the average amount of that charge?—I suppose about six or seven pounds a quarter.

How many patients had you upon the average?—From fifty-five to sixty. I should think it has been about seven pounds upon the average.

Can you give any estimate of what the clothing for your patients has come to?—I should suppose about three pounds a head per annum, I do not think it is more.

Was there never any agreement with Mr. Stratton in the first instance?—No.

The minutes contain the substance of the agreements which have been entered into with Mr. Warburton at different times?—Yes, they do.

Mr. Thomas Baynard Chappel, called in; and Examined.

*Mr.
T. B. Chappel.*

YOU are clerk to the governors and directors of the poor of St. George Hanover-square?—I am.

Will you produce the contract between the governors of the poor of your parish, and Mr. Warburton, for the maintenance of the pauper lunatics?—There is no written agreement in existence; the only agreement is a verbal one. The paupers belonging to St. George's Hanover-square were at the same house previous to Messrs. Warburton and Talbot taking the house, and they have remained there ever since.

Was there no written agreement with the predecessor?—Not that we are aware of; I have gone back for sixty years, and found none; the person who had the house previous to Messrs. Warburton was a gentleman of the name of Stratton; they were there at eight shillings and nine shillings a week, and have continued there from that time up to this with slight alterations, from eight shillings the minimum, to ten shillings the maximum.

What does that allowance comprehend?—Board, lodging, in fact every thing but clothing.

Did it comprehend medicines?—Yes.

Was medical attendance extra?—No, nothing for medical attendance; our physician attended there eight times in the course of the year.

Does not Mr. Warburton make a quarterly charge to the guardians of the poor for medicines, independently of any charge of nine shillings per week?—I believe not.

Do you know whether your patients have been supplied with medicines at all?—I understand they have been occasionally, but I have not particularly looked into that point.

You say there is no written agreement, is there no memorandum at all?—None that I can find.

Are you vestry clerk?—No, only clerk to the governors of the poor.

How long have you been so?—Seven years.

When was the last agreement made with Mr. Warburton?—The last alteration was

was in August 1824, when Mr. Warburton, by letter, began to increase his rate of charge, from eight shillings to nine shillings per week. He had previously reduced it in 1822, by his own act, from nine shillings to eight shillings.

Was it acceded to by writing or by verbal agreement?—By letter. In 1822, he stated that he was enabled by the low price of provisions to reduce the charge to eight shillings a week; and in 1824, he stated, that in consequence of the rise in the price of provisions he must beg for an increase to nine shillings a week; that was notified by a letter to the directors of the poor.

Was there in the notification any reference to a subsisting agreement?—None whatever; but simply that they would comply with his request.

Nobody can speak precisely to the terms of the agreement beyond the contents of that letter?—No; I spoke to Mr. Lee, who had been clerk before me for upwards of forty years, he informed me that there was no agreement in existence that he was aware of; that when he came there the paupers were maintained at Mr. Stratton's, and that Mr. Warburton took the business of Mr. Stratton, and that they continued there; and that there was nothing more passed but a verbal communication between Mr. Warburton and the governors of the poor.

Are you sure there is no charge for medicines in the books of the parish?—I am certain there is not.

Who furnishes the clothes?—We furnish them.

What is the expense of clothing?—The male patients we conceive stand us in 1 *l.* 16 *s.* and the females 1 *l.* 18 *s.* 6 *d.*; they are thoroughly clothed once a year, and one change of linen.

What do you mean by one change of linen?—Two shirts and two shifts, and two pairs of stockings, and so on.

Mr. William Lee, called in; and Examined.

YOU are master of the workhouse for the parish of Saint Pancras?—Yes, I am.

Have you any contract between your parish and Mr. Warburton for the management of the poor?—Only a verbal one.

Is there any minute entered in the books?—I am not aware of any. The parish have sent their lunatics there for the last twenty years, to my knowledge, and I know of no written contract; the price has varied now and then, according to the price of provisions; and they sent us a letter, saying, we will take off sixpence or put on sixpence a week, as circumstances may require.

What is the price you pay?—Nine shillings per week.

Does that include medicines?—Yes, I believe it does.

It includes every thing except clothing?—Yes, clothing and porter; if the patients are sickly and require porter we pay extra for that.

You do not pay for any medicines?—I am not aware that we do.

Is it usual for you to make other contracts with parties without entering them in your books, and having any thing to show?—We only contract for a certain quantity of provisions, and coals and candles, and so on.

Do you do that under written contracts or verbal?—Written contracts.

What may be the average number of your pauper lunatics in Mr. Warburton's care?—At present we have forty-three.

And those persons are there without your having any written contract for their maintenance?—Yes. We pay our bills quarterly.

You not only have no contract but no memorandum in writing, of the substance of any contract?—None whatever.

You have no means of rectifying any mistake that may arise in the understanding of the agreement?—No; I do not see how any mistake can well arise; there is a certain price agreed upon, which is nine shillings per week, and that is paid; we check the sum with their bills when they come in; we keep a book; we enter every patients name that is there, and check their bill with that when it is audited.

As to what Mr. Warburton does, or ought to do, for those particular patients, the sort of particular dietary, is not part of the contract?—No. It may depend perhaps on the state of their health, or the state of the malady, or what not.

No part of that agreement includes anything as to the mode of treatment when they are put into that asylum?—No; not that I am aware of.

Is it the practice of yourself or any person connected with your Board, to attend at Mr. Warburton's to see that the pauper lunatics have proper treatment?—Yes; our Board attend twice or three times a year, and our medical officers have an order to attend once a month, at least; and I believe they do attend oftener.

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Mr.
T. B. Chappel.
18 June 1827.

Mr.
William Lee.

Mr.
William Lee.

18 June 1827.

Is there any extra charge made for medicine, or anything of that sort?—I am not aware that there is.

You are quite aware of the terms of the contract?—Yes.

If the Committee were informed that there were extra charges of that nature there must be a mistake?—I cannot say positively, for I do not see the account; the vestry clerk keeps the account; I am not aware of any charge for medicines.

Is it part of the contract, that Mr. Warburton should furnish them with medicines?—I have always understood that he is to furnish them with medicines, if they are required.

When Mr. Warburton is paid, do the governors take a receipt?—Yes, of course.

Do you know for what the money professes to be paid?—For the maintenance and care of the lunatics, I presume, but I do not pay the bills.

Have you got any one of those receipts with you?—No.

There is no distinction made between curables and incurables?—No; they are sent there for safe custody no doubt.

Emanuel Allen, Esq. called in; and Examined.

*Emanuel Allen,
Esq.*

WILL you have the goodness to inform the Committee what progress has been made by the magistrates of Middlesex in their inquiries as to the state of pauper lunatics?—They have had a great many meetings, and have proceeded to make a partial report, which the quarter sessions declined receiving last week, requesting them to complete their report, which they expect to do in a few days.

Can you give to the Committee that partial report?—No, I was not directed to produce anything but the returns, and it was not left with me; it was taken by Colonel Clitheroe, the chairman of the committee.

What returns have you?—Part of the returns made by the parishes of the pauper lunatics in the different establishments in the county.

Have you any account of the number of them?—I have only part of them, and the particulars as far they go; but Colonel Clitheroe, Mr. Lushington, and Mr. Bouverie, are a sort of sub-committee to furnish a report for the sessions. I have a letter from Colonel Clitheroe requesting me to send to Mr. Bouverie all the returns which have any reference to pauper lunatics under the care of Mr. Warburton. I have therefore only the remainder.

Doctor *Bright* delivered in a Paper, which was read, as follows:

Dr. Bright.

“ Among the various imperfections with which the Act for regulating mad houses abounds, may be enumerated the following:—

“ Licences are granted to all who shall desire them. Whatever may have been the previous conduct of the applicant for a licence, the commissioners do not feel themselves authorized to refuse it, nor is any misconduct, except that of refusing admittance to the commissioners, punishable by forfeiture of the licence. These licences are granted only on one day in the year; they are not granted to only one individual, although many may be interested in the same establishment. No residence by the proprietor, or by one of the proprietors, is required. No licence is required for keeping only one lunatic; hence many may be kept by the same individual without licence or notice, provided only that he keeps them in separate tenements. Pauper lunatics are often, if not generally, sent without any medical certificate.

“ The qualifications of persons granting certificates are not defined with sufficient precision. A chemist has considered himself entitled to sign a certificate, although he has served no apprenticeship to an apothecary.

“ It is a practice much too frequent for the same individual to sign a certificate in more than one capacity.

“ The visitations are not sufficiently frequent.

“ The following are suggested as points for consideration in framing a new Act.

“ There should be a power to grant licences on more than one day in the year, with this proviso, that they should all expire on the same day.

“ All persons applying should bring accurate plans of their houses, and of all such changes therein as may from time to time have occurred; and these plans should be left with the secretary.

“ In the licence the names of all persons interested should be inserted, and it seems very advisable that one of the proprietors should reside in the house.

“ Paupers should not be sent without a medical certificate, particularly so where the

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Dr. Bright.

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the county does not possess funds or spirit enough to build a county asylum ; but this is a measure so obviously expedient, that it is to be hoped it will be adopted wherever the means are not wanting.

“ The certificates should be signed by those who are duly authorized to practise in one of the three branches of the profession ; and it would be very desirable that every certificate should have the signature of two practioners.

“ A penalty should be imposed on every one signing without personal examination ; no individual should sign in more than one capacity.

“ The directions of the friend or friends of the patient should be signed and sealed by them.

“ Every patient not a pauper, paupers being already visited periodically by the medical officers of the parish by which they are sent, should be visited at certain intervals (say every six months) by some medical practitioner, who should report, in a book to be kept in each house for that purpose, the progress towards convalescence of the patient or patients whom he has so visited.

“ A fresh certificate should be required on each re-admission.

“ The commissioners should be empowered to take recognizances to withhold or annul licences whenever necessary, and also to liberate whatever patients they may find in a state of sanity ; and they should be authorized to make regulations from time to time for the due execution of the Act.

“ The number of visitations should be much increased ; every house containing more than four lunatics should be visited four times in the year.

“ There should be no limitation of the hours for visitation.

“ The rate of remuneration of the commissioners should be altered, and the mode of licensing, together with the sources from which the expenses of the Act are to be defrayed, must probably undergo a change also.

“ The commissioners should be empowered to enter all houses wherein they have sufficient reason to believe that more than one lunatic is harboured.

“ The most difficult, but also perhaps the most important, proviso will relate to those patients who are kept singly in houses not licensed. The present system, in this respect, is certainly open to dreadful abuse. This might, perhaps, be obviated if the keeper of every such house were to give notice of the admission of the patient, without stating his or her name ; and if such house were occasionally visited by one or more commissioner, accompanied by the secretary, who shall nevertheless have no authority to require the name of the patient or of the patient’s friends.

“ J. Bright, M. D.”

Martis, 19^o die Junii, 1827.

ROBERT GORDON, ESQUIRE,
IN THE CHAIR.

[A Statement delivered in to the Committee, by Mr. Warburton, with reference to charges made against his Establishment, in the evidence taken before the Committee, was read, and is as follows:]

PATIENTS Admitted and Discharged, cured, from the White House, in the Years 1823, 1824, 1825, 1826.

Mr. Warburton.

19 June 1827.

YEARS	ADMITTED.		DISCHARGED.		TOTAL	TOTAL
	Men.	Women.	Men.	Women.	Admitted.	Discharged.
1823 - - - -	54	56	21	34	110	55
1824 - - - -	52	52	29	30	104	59
1825 - - - -	71	62	38	33	133	71
1826 - - - -	51	56	40	35	107	75
					454	260

Mr.
Warburton.

19 June 1827.

To the Honourable the Select Committee appointed to inquire into the treatment of Pauper Lunatics in the county of Middlesex, to consider the propriety of extending the provision of the Act of the 14th Geo. 3, c. 49, to Pauper Lunatics, and of the consolidation of all Acts relative to Lunatics and Lunatic Asylums, and of making further provisions relative thereto.

Honoured Sirs,

Hackney, June 19th, 1827.

HAVING read various statements on the subject of pauper lunatics of Middlesex, in which my name, as the proprietor of an asylum at Bethnal Green for the reception of pauper lunatics, was adverted to, I felt it my duty to wait upon your Committee the following day, to ask leave to be permitted to attend the Committee in vindication of my character, and in opposition to the assertions made against my establishment; and I was honoured with an interview with one of the Members of your Committee, who expressed himself fully satisfied that my feelings were most natural upon the occasion, and that both justice to myself and the investigation of truth by your Committee would require that any testimony I might adduce would be readily received. On the evening of that day I received a letter from the clerk to your Committee, stating I was at liberty to peruse the evidence taken before your Committee at his office. I attended there on Saturday last, and also upon your Committee, when you were pleased to repeat that I might peruse the evidence, and that you would receive from me any observations I might think necessary to make thereupon; but you did not think proper to comply with my request to be furnished with a copy of the evidence, and which my object in asking for was to be better able to make my observations thereupon, and to produce evidence before you in refutation or explanation of the evidence given to the disparagement of myself and my establishment. I again attended at the office of the Committee clerk yesterday, and finished the perusal of the evidence given before you up to Saturday last. I had been summoned to attend your Committee this day at one o'clock, and it has been quite impossible for me (and I am therefore satisfied will not be expected by your Committee) to enter into any very minute observations, such as my character and the reputation of my establishment demand, on the evidence already adduced before your Committee. I would take the liberty of submitting to the Committee, that in any observations I may now make, or by any witnesses I may request leave to produce, I have no object in opposing the erection of county asylums for the reception of pauper lunatics; but I am merely anxious to avoid the imputation, that the necessity of such a measure should appear to arise from the improper character and management of my own establishments: a feeling I am satisfied every Member of your Committee will deem both natural and called for after the statement made to the Honourable the House of Commons by your Honourable Chairman, and by the evidence already given before you. From the perusal of the evidence, I collect that the principal charges against myself and my establishment at the White House, Bethnal Green, are,

That the house is too crowded with patients:

That no medical attention is paid:

No curative process used:

No classification of patients:

No variation of food, according to the health and state of the patients:

Not sufficient number of keepers:

Inhumanity and neglect of superintendents and keepers towards the patients:

That convalescent patients are *made* to act as keepers:

That maggots were found in the cribs from want of cleanliness:

That the crib rooms appropriated to particular classes of patients had been wilfully concealed; that the patients were confined in their cribs from Saturday evening until Monday morning, to the injury of the patients, and merely to save trouble to the keepers; that the patients were washed with mops, with cold water, in the winter; that the male crib patients were allowed only one blanket in winter, no soap to wash themselves with, and only one towel a week; and that the crib rooms were filthy to an excessive degree:

That the size of one of the crib rooms was about 18 feet long only, in which were sixteen cribs, and as many patients:

That when a friend called, the patient was brought from the crib in a blanket into another room, to avoid the discovery of the crib room:

The evidence may contain many other points prejudicial to me and my establishment in the estimation of your Committee, and which have escaped my observation

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Mr.
Warburton.

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or recollection; and if so, I earnestly solicit that such parts may be pointed out to me, that I may have an opportunity of producing evidence upon them.

I observe, that two witnesses, Anne Gibbons and Edward Oldham, have given evidence before your Committee; it may be right your Committee should be informed that these two persons were pauper lunatics of the parish of Saint George, Hanover Square: the first, after having been discharged from Bethlem hospital as an incurable lunatic, was placed in my establishment at the White House, Bethnal Green, and was afterwards discharged from thence as cured; the other, after having been discharged as incurable from Saint Luke's hospital, was placed in my establishment, and discharged cured. I have not time to enter into a commentary upon the evidence generally, but I propose to adduce evidence on every charge. I have been the proprietor of this establishment since the year 1800, and it is with pride and satisfaction I state, that during the whole of that period I have never had a complaint made, either by the medical commissioners, by the medical gentlemen of the different parishes, by the overseers and guardians of the poor, or any others, of want of care and attention to the patients, of want of medical attendance, of want of food or bedding, or any other necessary. I admit that it has been observed at times that the house has been too crowded with patients, and I have concurred in that feeling; but the numbers have been always fluctuating, and I can assert as an indisputable fact, that there has never been any contagious disease whatever in the asylum, and that a more healthy establishment cannot be proved to exist than this has been ever since it has been under my care. Typhus fever was about sixteen years ago brought into the asylum by an admitted patient, which was soon subdued, and I mention this from recollection as the only instance.

Lord Robert Seymour has been frequently at this establishment, and has seen every part of it, and every patient in it, over and over again; and I take the liberty of submitting to the Committee the copy of a letter I addressed to his lordship on this subject in June 1825, with a copy of his lordship's reply; also the copy of a letter I addressed to his lordship in December last; also the copy of a letter to Robert Browne, Esquire, on the 8th January last, who has been examined before your Committee; also a letter of the 5th March last, addressed to me by Mr. S. Watts, clerk to the directors and guardians of the St. Mary-le-bone poor; also the copy of a letter addressed by Mr. Peter Cosgreave to the committee of the parish of St. Clement Danes on the subject of my asylum, the pauper lunatics of which parish are under my care, and which letter was voluntarily addressed, without my knowledge; also letter from Mr. Browne to me, dated the 6th November 1826, and another of the 6th December 1826. I am assured that the Committee will feel that these letters are all of importance.

The Committee will be pleased to bear in mind, that the witnesses who have been examined have, according to the rules of your Honourable House, given their evidence without my being present, and of course without any opportunity on my part of requesting your Honourable Chairman to submit any questions which might occur to me as calculated to do away the effect their testimony might produce; but of this I do not complain, and have only to crave the indulgence of your Committee to examine such witnesses as I have hereafter pointed out, in order to meet all the points I have above selected from the evidence, and to request that myself and my superintendant at the White House, Mr. Jennings, may be allowed to attend the Committee, in order to suggest to your Honourable Chairman such questions to each witness as may be material to the facts I have to prove, and which, without such assistance, your Committee might not have any data to lead them to.

I have taken the liberty of submitting in writing the outline of my own evidence, in order that you may be pleased to put such questions to me as the statement may lead to, as well as any other questions your Committee may think fit to propound.

The witnesses I beg leave to request to have examined are,

Some of the medical commissioners for the present year, commencing last November, under the Act for regulating madhouses, *viz.* Sir Henry Hallford, Dr. Frampton, Dr. Yates.

Medical gentlemen, not commissioners: Dr. Hooper, physician to the parish of Mary-le-bone,—Dr. Hue,—Dr. James,—Dr. Roberts,—Mr. Phillips, surgeon of Mary-le-bone: All of whom are well acquainted with the establishment.

Mr. Fernandez, surgeon to St. Andrew's Holborn, whose pauper lunatics are in my asylum.

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Mr. Cosgreave, surgeon to St. Clement Danes.

Mr. Dunstan, surgeon to the establishment, and who is also surgeon to St. Luke's hospital.

Mr. Cordell.

Mr. Dunstan, superintendent of St. Luke's.

Mr. Powell, late surgeon to St. Clement Danes.

The guardians and parish officers of the different parishes who have attended their patients: the names of these gentlemen I have not yet been able to ascertain.

Lord Robert Seymour.

Mr. Serjeant Pell, and a gentleman who visited the establishment with him, name not yet known.

Mr. Seaman, overseer of St. Pancras.

Other magistrates and gentlemen who have attended the establishment, and whose names shall be obtained.

Mr. Warburton.

Mr. Jennings, superintendent of the establishment.

Mrs. Jennings.

William Barnard, one of the keepers.

Mary Rolfe, one of the female keepers.

In conclusion, I beg leave to state that I court and do not shrink from inquiry; and I take the liberty of guarding your Committee not to mistake those feelings which must naturally be excited in the breast of every one in considering the cases of unfortunate lunatics, by a belief that those unfortunate human beings are neglected and abused, when in truth it is the picture of the malady itself which causes the feelings of abhorrence.

By the testimony of the witnesses, I propose to be examined by your Honourable Committee, I trust I shall satisfy your Committee that my house has never been so crowded with patients as to produce injury to them, either mentally or bodily:

That medical attention is given to the patients both as regards mental and bodily disease; and therefore that the curative process is attended to, and that a large proportion of the patients are discharged cured, as appears by the annexed list:

That a classification or separation of the patients is made:

That variation of food, according to the health and state of the patients, is made; and that neither attention nor expense is spared in furnishing the patients with whatever is considered best upon the occasion, and that the best description of food is at all times provided for the whole establishment:

That there are a sufficient number of keepers:

That neither myself, my superintendents or keepers, have ever been guilty of inhumanity or neglect towards the patients; but on the contrary, that the greatest care and attention has been paid to them:

That convalescent patients are not *made* to act as keepers, and that they are merely *allowed* for their own gratification, and by way of keeping them employed, to assist the keepers occasionally; and that no patient was ever made against his will to assist:

That maggots never have been found in the cribs for want of cleanliness; and that the cribs are daily washed with warm water, soap and sand.

That the crib rooms appropriated to particular classes of patients never have been wilfully concealed; that they have been always open to the inspection of the medical commissioners, to the medical gentlemen of the different parishes, to the overseers and guardians of the poor of any of the parishes, and in short, that there were never any directions to conceal those rooms by me; any object for concealing them, or, in fact, any concealment; and that such rooms are just as fit for the purposes for which they are used as any other parts of the establishment; and that the very situation of the rooms denies the presumption of any intentional concealment of them:

That the patients who have been confined in their cribs from Saturday evening until Monday morning are of the description of violent patients, insensible to the calls of nature, and helpless, paralytic patients, also insane, and when up must necessarily be confined to chairs; that this mode of treatment has been adopted ever since the establishment began, and is practised at St. Luke's hospital, and is done entirely for the sake of the patients, and not with any view of saving trouble to the keepers, and that it does not save trouble to the keepers:

That the patients have never shown any opposition to the plan, but on the contrary have been much more tranquil and quiet than when up; and no visitors being allowed

allowed of a Sunday, the house is in a state of comparative quiet, and the patients have reposed the greater part of the day; that they are regularly and carefully fed and attended to, and that in very few instances has any patient shown an inclination to get up; and if he has, he has been immediately got up:

That there is a large copper of boiling water always close to one of the crib rooms, for the purpose of providing warm water to wash these patients in winter; and that they are washed with soap and flannel; and that in no instance has a mop ever been applied to the person of a patient, except in the case of any very violent male lunatic, whom upon his first rising it was dangerous to approach, and afterwards he has been washed, when more calm, with flannel and water; and that the instances of this sort have been very few indeed:

That the crib patients have fresh straw daily, and oftener, if necessary; that a double blanket is laid single upon the straw, one half of which is under the patient, and the other folded over him; that over this another blanket is laid, and over that a rug; and that as to such patients as by violence are apt to throw off their clothes, or destroy them, woollen boots are drawn over their legs, and so fastened as to prevent their kicking them off; that soap is allowed to the patients who can wash themselves, and that there is always a large towel suspended in each of the two male sitting rooms, and which is changed twice or three times a week; and that many of the patients have cloth for towels given them, which they use themselves:

That the crib rooms, instead of being filthy to an excessive degree, are washed and scoured every day; and as much attention, and much more labour, is bestowed upon them than any other rooms in the establishment:

That the size of one of the crib rooms, stated to be about 18 feet long, in which were sixteen cribs and as many patients, is contrary to the fact; as the room supposed to be alluded to is 29 feet 3 inches long, by 16 feet 2½ inches wide, and 10 feet 5 inches high, in which were never more, when the house was most full, than fifteen cribs; and that these cribs are only used as patients requiring them render them necessary:

That it is not the fact, that when a friend called to visit a patient, such patient is brought from the crib room in a blanket into another room, to avoid the discovery of the crib room; and that the fact is, that if a friend calls, and frequently a female friend calls, and there are other patients in the crib room, the patient is, for decency's sake, and also for the comfort of the friend, brought into another room; and that there never was an object in concealing the crib rooms:

That the reason why the gentlemen from St. George's were not shown the crib rooms was, that there was no patient at that time in the room; and that if the superintendent had been aware there was any wish to see the crib rooms, they would have been instantly shown.

I have the honour to remain, with great respect,

Honourable Sirs,

Your very obedient servant,

Tho^s Warburton.

Mr. Thomas Warburton, called in; and Examined.

YOU have stated in the Paper which you have delivered in, that no complaints have ever been made against your establishment by the commissioners, are you aware that the Committee have before them the books of those commissioners, and that there do appear to have been several complaints made against your establishment?—I am not aware of any complaint made by the commissioners, unless it be that of the house being too full, that I admit has frequently been the case.

Have no complaints ever been made by the commissioners as to the blankets and clothing in your establishment?—Not that I recollect to have ever heard of.

It appears that such complaint has been made by the commissioners, and such complaint appears in their books?—It may appear in their books, but it was never made personally to me, or to my assistant, to my recollection.

It also appears that complaints have been made by the commissioners of the close and offensive state of the rooms?—Not that I ever heard of, but I have not access to the commissioner's report. Such complaint has never been made to me personally, and I am not permitted to see their minutes.

Do you mean that when the commissioners visit your house, if they find any thing

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thing wrong in your house, they make no complaint to you of it?—I cannot answer that question; I cannot say that they did not make any complaint to any body; I can only say that I have no recollection of any complaint of that description ever having been made to me.

You state in your paper, “I have never had a complaint made either by the medical commissioners or by the medical gentlemen of the different parishes.” Do you mean, after the questions that have been put to you by the Committee, upon reflection, to persevere in that statement?—As to the general treatment of the patients, no such complaint had been made, to my recollection; I do not recollect any.

Then you mean to assert, that none of those complaints which appear to have been inserted in the books of the commissioners, have ever been made to you?—There might have been years ago, when one of my houses was pulled down; I was rebuilding the house, and the patients, during that time, were in a more confined state than usual, but that is a great many years ago; that house was built in the year 1811 or 1812.

It appears that on the 20th of June 1817, the commissioners state that the rooms were ill numbered, and that the number of keepers was insufficient; do you remember that complaint having been made?—Upon recollection, I think there was a complaint of that sort.

What steps were taken, in consequence of that; was the number of keepers increased, in consequence of that complaint?—I should think the keepers were increased in proportion to the increase of patients, but I have no recollection of any increase at that particular period.

You have no recollection of that report of the commissioners, complaining of an insufficiency of keepers being followed up by an increase?—I have no recollection, but if it was a necessary one, I am sure it would have been.

Do you remember the report of the commissioners on December the 5th, 1816, where they state that the paupers were much crowded, and the day rooms close and offensive?—No such report ever came to my knowledge; it might be a minute upon their books, but I have no recollection of any such report coming to my knowledge.

On December the 10th, 1817, there was a visitation of your house, when they stated that the rooms were much too crowded, that they were close and oppressive, that they were not improved since their last visitation, and the secretary was desired to state this to Mr. Warburton?—That I recollect being stated.

Will you have the goodness to say whether, after these circumstances are placed before you, you still persevere in the statement which you delivered in to the Committee, that no complaint had ever been made by the medical commissioners?—Not of the treatment of the patients, or of the crowdedness of the house. If the Committee refer to my statement, they will find that I have admitted that the house was fuller than I wished it to be, but by ill treatment, I meant personal ill treatment.

Do not you consider, that keeping patients in a crowded and offensive room is a want of care and attention to those patients?—Certainly, if such were the case, so as to be found injurious, but it never was.

Were you always present when the commissioners visited your house?—Hardly ever; I never knew when they came, nor did any one.

Then, in case they found fault with any of the proceedings of your house, what was the course generally taken, of making their observations known to you?—I never heard an observation of any ill treatment of the patients beyond what might be supposed to arise out of the house being too full of patients.

Had the commissioners any opportunity, while they were there, of ascertaining the treatment of the patients?—Certainly; I should think so; they inquired of every patient who was capable of giving a rational answer how they were treated; it was a rule with the commissioners to do that.

Do you remember the commissioners, in December 1816, communicating this circumstance; “That Philip Sturges having reported an instance of rough conduct towards a debilitated patient by her keeper, M. Jones; and Dr. Frank having returned to the pauper women’s house for the purpose of inquiring into the facts, and found them to be in some respects correct, the keeper was called in, and pleading provocation for the excuse of her conduct, was admonished and censured thereupon;” have you any recollection of these circumstances having taken place in your house in December 1816?—I have not.

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With respect to the registered complaints of the commissioners, you have a recollection of some of them, but not of others. In the case of those that you do recollect, by whom were the complaints communicated to you?—By the commissioners I should imagine; if the commissioners had any communication to make, after a visitation, it was made in writing to me on most occasions, but I do not recollect that it was on the particular points mentioned heretofore.

You recollect a complaint in the year 1817?—I do.

There are other complaints registered against you in that book, which you say you do not recollect?—If they were communicated, I think I should.

By whom were the complaints in 1817 communicated?—They must have been communicated, if made by the secretary, directly to me.

But you cannot give any positive answer upon that subject?—I have no doubt that they were.

Then you think it is possible that other complaints might have been registered against you which were not communicated to you?—I think it possible.

When you usually demanded 9s. a week for pauper lunatics, why did you take patients for a less sum, though you mentioned that they could not be maintained for that sum?—A person of the name of Fox had been round to almost every parish in the county of Middlesex, and offered to take patients at 8s. a week, finding them in every thing; I refused two of the parishes to keep them under my care at that price, and they were removed; he went to other parishes, and I sent for answer, that I would keep them for nothing sooner than such a man acting in so very unjustifiable a way should obtain possession of the patients.

Then the Committee are to understand that you did take from those parishes patients at 8s. a week?—I did, for the cause I have assigned.

Then do you mean to say, that out of humanity to those people you took them at that price, knowing at the same time that they could not be kept, and kept in every thing, for 8s. a week?—My motive was to prevent a man taking those patients who had made an application in the way he had done.

What number of patients may you have now at 8s. a week?—I cannot exactly recollect the number, there are several parishes.

Have you 100 patients at 8s. a week?—I should think as many nearly, if the question includes both houses; I should say 80, at least.

Do you know a house at Hoxton belonging to Mr. Burroughs?—I have no connection with it; I know there is such a house.

Do you know at what price Mr. Burroughs takes those patients?—I do not.

Did you ever hear it?—Never to my knowledge.

You never heard that he does not take patients for less than 9s. or 9s. 6d.?—Never.

It appears that Mary-le-bone parish and Saint George's parish pay you 9s. are they clothed for that, or do they find their own clothing?—They find their own clothing.

What is the medical attendance in your establishment?—A surgeon attends every other day regularly; if patients are unwell, every day; if the nature of the case requires, he administers medicines, such as he conceives beneficial for the restoration of their health and mind.

Do you mean that that surgeon's attention is directed not only to the cure of their bodily disorder, but also to the cure of their mental disorder?—I do.

How long does he generally stay in your establishment?—I cannot answer that; he must answer that.

Your establishment contains upwards of 500 patients; do you consider that the attendance of a surgeon every other day is sufficient for the attention due to the bodily as well as mental afflictions of those 500 persons?—A great proportion of those patients have been discharged uncured from the hospitals, and have been in such a state of mind for so many years as to render the probability of recovery almost out of the question; but to such patients as are out of health every attention is paid, and new cases coming in, where there is a probability of recovery, are attended to; the surgeon can answer that.

Does your surgeon make a report to you of the state and condition of the patients, and does he keep any register of their treatment and of their cases?—I conclude he does; he reports to me frequently upon the state of the patients, especially those whose bodily health is suffering.

Does he make that report to you in writing, or is it merely a verbal communication?—A verbal one.

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How often is that report made to you?—Perhaps two or three times in a week ; I see him as often.

Does a report follow every separate examination?—No.

You say that you are not aware how long the surgeon stays in your establishment?—I am not.

Have you any personal experience of the manner in which the surgeon performs his duties?—Unless by the communication I have with him, twice a week, when he meets me there ; then a report is made.

In case any communication should be made to you of any patient being bodily ill, is there any peculiar notice or care taken by you of such patient?—Immediately.

Patients then who are bodily ill are not permitted to remain with the other patients, without being removed to the infirmary?—They are universally taken care of ; and separated if their bodily illness is of such importance as to require that attention ; but a great number of those who are bodily ill prefer walking about and being with the other patients, to being alone.

Do you make any separate charge to the parishes who send you pauper patients for medicines?—The parishes have frequently objected to that charge, the charge for wine and porter, and various other things ; not all the parishes, but some have ; and the expense in those articles to myself is very considerable every year ; for such things as the sick require ; that I can vouch upon my oath.

Have you received a medical education yourself?—I have not in any other way but in this particular branch ; I was brought up under a medical gentleman who kept a house for the reception of lunatics and have continued in that situation, not paying any medical attention to any other cases than those ; therefore, I do not consider myself a regular medical man.

Your never were a medical practitioner or received a medical education in the general sense of the word?—No, except in the way I mention.

Will you have the goodness to state what your own personal attendance at your establishment for pauper lunatics is at Bethnal Green?—Twice a week regularly.

Then are the Committee to understand that the medical gentleman who visits three times a week reports to you the result of those visitations at those two periods of the weeks at which you are there, and no oftener?—Oftener, I should think.

Then he communicates to you at periods when you are not attending upon the lunatic asylum at Bethnal Green but elsewhere?—He does when I see him elsewhere ; if there be any particular case requisite to be reported he does it.

He makes it his business to see you as the proprietor of that lunatic asylum?—I do not know that he makes a point of seeing me.

Then in short you can only look to him for a report twice a week of the health of the patients?—Certainly.

What is the name of that medical gentleman?—Mr. Dunston.

Is he a regular surgeon or physician?—A regular surgeon.

Is he a relation of yours?—Yes, he married my daughter.

Is he a regularly educated medical man?—Perfectly so.

Where is his usual place of abode, how far from your establishment in Bethnal Green?—In Old Broad-street.

Did he ever mention the case of a man of the name Ferguson to you in last April?—Certainly.

What were his observations upon that case?—That he had water in the chest ; he was attended daily.

What was the result of that man's case?—The man died,

Was he in the infirmary, or was he allowed to walk about with the other patients?—He was allowed to walk about with the other patients.

By his own request?—I conclude so.

But you know nothing upon that subject?—No.

Are you aware of some very strong observations upon that case which were made by the visiting surgeon of the parish of Saint Pancras?—I am.

What have you got to say with regard to those observations?—The observation made by that medical man was that that patient ought to be bled, the surgeon of the house came soon after and said, "Bleed ! bleed a man in that situation, he would die under the lancet ; Mr. Dillon may bleed him if he pleases, but I will not."

Was Mr. Dillon present when that observation was made?—I know not, I think not ; it was made to the superintendent.

By the superintendent you mean Mr. Jennings?—Yes.

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With regard to the case of Ferguson, were there not some observations made by Mr. Dillon early in his illness?—I cannot tell of any observations being made, there were none made personally to me; I can only say, that that particular patient excited my attention, and as I do in every case where they want care and comfort pay attention to them, I did so to him.

How long previous to that man's decease had your attention been particularly called to the state of his bodily health?—A considerable time; he was ill a long time.

Had he been pointed out to you in the first instance by Mr. Dunston?—I saw the man repeatedly.

Was your attention called to his case by the medical attendant, Mr. Dunston, or was it your own observation?—Both.

What objections are made by the parishes to paying for those extra articles of diet, such as wine, &c.?—I do not know that the parish of Saint Pancras is one of those that have objected, but the parishes in general have, with the exception of Mary-le-bone; Mary-le-bone and Saint George's I believe were liberal, but the generality of the parishes did make so many objections to pay for medicine that it was not charged.

Will you state the name of any one particular parish which in your recollection has objected to the payment of those extra articles of diet?—The superintendent certainly can answer that, who reports all those objections to me.

Will you state whether any written agreement is entered into with you by those parishes for those pauper lunatics?—I am not aware of any written agreement.

Could such a thing have existed without your privity and consent?—Certainly not.

Then you have no doubt there is no such thing as a written agreement in existence, you must know whether you ever signed such an agreement?—I never did to the best of my knowledge, the superintendent, Mr. Jennings, might.

Has he authority to sign agreements for you?—He has.

Do you know whether the objection made by those parishes has not been this, that those extra articles of diet were included in your either verbal or written agreement made with the several parishes for the maintenance of those patients?—They were not charged, medicine in almost every instance was not charged.

But in those instances in which those extra charges were objected to, did the parishes say that you were bound to furnish those articles for the 9 s. a head, for which you consented to take those patients into your establishment?—Many of them did.

Was not that reason given by all the parishes that so objected?—I think so.

Was not the reason given by the parishes who objected to those extra charges as to diet, this, that the original agreement of each pauper having so much a week paid for him by the parish to you, was to include every article excepting dress?—It was.

Do you mean to say that you have no other medical attendance than that of one surgeon every other day?—There are two; one regularly attending and another gentleman, a Mr. Cordell, a very respectable surgeon, who attends perhaps two or three times a week in addition to the other.

What do you mean by regularly attending?—I mean that he frequently comes to the house, he is a friend of Mr. Dunston and attends for Mr. Dunston.

That is to say, when Mr. Dunston does not attend he attends?—He does.

But the regular medical attendance upon which you can count is only Mr. Dunston's upon every other day in the week?—Yes.

Have you any resident apothecary in your establishment with an establishment of pharmacy?—No.

If any one of your patients should be suddenly seized with apoplexy or any other disease, to which of course you know that insane persons are particularly liable, have you any means of procuring him instant relief?—Immediately; there is a surgeon who lives within three or four hundred yards of the house, and whenever any sudden illness takes place, he is sent for immediately.

In case he should not be at home, of course you could not have his assistance; he does not belong to your establishment?—He does not.

Who is that surgeon?—He lives close by Bethnal Green, but I do not recollect his name.

In point of fact, have you ever known that man sent for?—Repeatedly.

But you do not know his name?—I do not; I could learn his name in five minutes.

You say he has been repeatedly sent for?—Not in my presence.

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Is Mr. Cordell's attendance in addition to Mr. Dunston's, or when Mr. Dunston happens not to be able to come, does Mr. Cordell come in and take up a case about which he knows nothing?—Mr. Cordell visits for Mr. Dunston in his absence.

And only then?—Frequently when Mr. Dunston is on the spot he comes with him, and on other days by himself, not on the particular days Mr. Dunston attends.

Is Mr. Cordell his partner?—No.

He is a friend only?—A friend.

At what hour in the morning does Mr. Dunston come?—About ten o'clock generally.

At what hour does he go away?—He does not stay longer than to examine the patients and to make his observations upon them.

In case he should neglect to come on any one of those days what would arise?—Mr. Cordell would come instead of him.

Is Mr. Cordell paid by you for his attendance, or does he merely act as a friend of Mr. Dunston's?—As a friend of Mr. Dunston's.

What do you pay for all the medical treatment you have at the asylum?—Five hundred and fifty pounds a year.

Does that include medicines?—Including medicines.

You pay Mr. Dunston 550*l.* year?—Yes.

Is Mr. Dunston the surgeon of Saint Luke's hospital?—He is.

Is he the resident surgeon of Saint Luke's hospital?—He is not resident; he is not required to reside.

Then you mean that Mr. Dunston has sufficient time not only to attend all your patients but to be the surgeon of Saint Luke's Hospital?—He has.

Who is Mr. Cordell; is he a practising surgeon?—A regular practitioner, living in Broad Street.

No register, you say, is kept of the treatment of the patients; to whom are directions given for their diet, and for such management as the surgeon thinks proper?—To the superintendent of the house, Mr. Jennings, and by him to the servants; and I believe no instance ever occurs of a patient being neglected in consequence of want of diet and want of care.

But you individually are not acquainted whether that is the case or not?—I give directions that nothing shall be wanted.

You visit on Tuesdays and Fridays; on what days does the surgeon visit?—He visits every other day, as it happens, oftener if required.

Does he meet you on the Tuesdays and Fridays when you visit to make a report?—Not to make a report.

Then it frequently happens that you go there on Tuesday and Friday and never see the surgeon?—It rarely happens.

Do you know whether Mr. Dunston has received such an education as peculiarly fits him for the examination of insane patients?—Yes.

At what hour do you generally go to this establishment?—At ten o'clock.

When do you leave it?—About eleven. I stay later, if required.

Then, in fact, your superintendence of the asylum is confined to two hours per week?—Those are the regular hours of attendance.

Do you make a point of going into all the different wards, and all the different rooms, when you go there?—Not always.

Are you in the habit of visiting every ward and every room once in the course of each week?—No.

Do you inspect the whole of the establishment once a fortnight?—Not unless some patient is confined in any of the rooms, then my attention is paid to that.

Then, in point of fact, you individually know very little about the particular maladies of each patient?—I examine them.

Do you examine every patient once a fortnight?—Such as require to be examined, I do.

How do you form your judgment, whether that examination is required or not?—By the sight of the patients; insane patients manifest their disease by their manner, especially old lunatics, and they require no examination in order to ascertain their insanity.

Do you see each patient once a fortnight, so as to be able to ascertain whether his manner be the same as it was previously?—Certainly, I see the greater part of them.

Do you see the greater part of them once a week?—I do.

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Has it not very often happened, that you have not seen a patient for three weeks or a month at one period?—It has.

Can you take upon yourself to say, that a month has not elapsed without your seeing some of the patients in your house?—It has happened.

And once a fortnight is the general time in which you see the greater number of patients?—I do not know that I can speak to that time; that is, once a fortnight regularly only.

Does it ever happen that a patient is in your house for a considerable time without your ever seeing him at all?—Never.

Did you ever see a man of the name of Solomon?—Frequently, every week.

How long has Mr. Dunston been connected with your establishment?—Twenty years.

Have you always given Mr. Dunston the same salary that you now give him?—No.

What was the salary that you originally gave him?—Originally he used to send in bills for medicine, but, as I have before stated, the expense was frequently found fault with, and then I gave him this salary, to prevent any murmuring at the bills.

Then he has always had the same salary?—Since it was a salary, it has always been the same.

How long has it been a salary?—I should think as much as seven years.

So that you contract with him for medicine and attendance?—I give him that sum for medicine and attendance.

What is the number of patients in your establishment?—In the two houses about 800.

Does he attend both?—He attends both.

How long has he been married to your daughter?—Twenty-one or twenty-two years.

Do you reside upon another establishment of yours?—I do; that is, I live near to it; I see that establishment every day.

You have not the immediate superintendence of either one of your establishments?—Yes, I have, not by living in it.

Is the other asylum a pauper asylum?—No.

There are no paupers there at all?—No.

You said that you gave Mr. Dunston this salary to prevent murmuring on account of his bills?—There were frequent complaints made by the parishes.

By whom were those complaints made?—By those who were to discharge them, by the friends of the patients.

You have said that the parishes did not bear the medical expense?—The parishes objected to the expense.

When you visit your establishment in the morning, what is it that you consider your duty to inquire into?—Into the general state of the patients health, bodily and mental.

Do you think it necessary to inquire into the state of the rooms and the apartments?—I do, if I hear any complaint; but not unless there be some complaint.

Do you at that time receive a report from the surgeon?—From the superintendent, Mr. Jennings.

At that time do you make any inquiry as to their food?—It is unnecessary to do that; they have abundance of food of the best quality.

Do you consider one hour in two days of the week as sufficient for all purposes of inspection which belong to you as the proprietor of that establishment?—I do.

Do you consider that by your contract with the parishes, the parishes should pay the expenses of medicine?—Not in the contract of all.

Do you charge the same sum weekly to those parishes who pay for medicine as you do to those who do not?—In some cases it is so.

The Committee understand that you give to the surgeon a regular salary in order to avoid his making out bills, which bills previously you were in the habit of sending in to the friends of the persons that were under your care, do you now in the charges that you make, not for pauper patients, but to other individuals, include in the annual sum that is paid, the medical attendance?—In some it is not included, in others it is.

The Committee understand that Mr. Dunston is the surgeon of Saint Luke's Hospital, and he is also the sole regular medical attendant of your two establishments, containing 800 patients; do you consider that any one individual is capable of duly attending to the manifold duties which such occupations must require of him?—I do.

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Do any of the patients, not pauper lunatics, by themselves or their friends, pay for medicine and attendance?—Some, but very few.

Then whether there is much sickness or little the payment to the surgeon is the same?—Just so.

How many establishments have you for the reception of lunatics, besides the Bethnal Green establishment?—Only one, Whitmore House, except private individual patients under my care.

Have you no interest in any other?—None whatever.

At what distance is that other establishment from that in which you receive pauper lunatics?—About a mile and a half.

What surgeon attends that other establishment?—Each patient in that establishment who chooses to have his own medical man, has him.

Can you mention the name of the surgeon who is most usually employed at that establishment?—Mr. Dunston.

Do you mean to say, that you have no insane persons under your care, except those belonging to this establishment at Bethnal Green, and the other establishment at Whitmore House?—Except in private lodgings.

Will you have the goodness to state how many persons you have under your care in private lodgings?—Eight, I think, at this time.

Are they all in separate private lodgings, or is there more than one person in each house?—Only one.

Who attends those eight patients that you have in private houses?—Myself and Dr. Warburton my son.

Does Mr. Dunston attend them?—No.

Who furnishes them with medicines?—The apothecary in the district, if it is at a distance, if not, the prescriptions are sent to Mr. Dunston.

It appears by the return that you have four houses?—There are licences taken out for the two establishments, which are called six houses, but they are all together, they are all No. 1.

There is one house at Hoxton, and is not there a house at Highgate?—No.

Then you have only the house at Hoxton, and the house at Bethnal Green?—No more.

And eight private patients in private lodgings?—Yes, no more.

Have you any in your own house?—Yes, one old patient, who has been many years there.

You have one in your own house, and eight patients besides in private lodgings?—The patients vary, I may have ten or a dozen at times.

How many do you happen to have at this moment?—Eight.

Eight private patients living in distinct lodgings, exclusive of those at Bethnal Green and Whitmore House?—Yes.

From the account you give of your very short attendance at stated times, would it not be very possible that your regulations might be departed from in the intervals of your absence?—I think not, I have such confidence in the superintendent, Mr. Jennings.

Supposing he were to violate that confidence, do you think there would be any great chance of detection?—I should think there would be a chance of detection.

How?—By report; as the chance of detection is in general.

Who is to make the report?—The people about the house would soon make a report.

Are you in the habit of receiving such reports from the people about the house?—No, they are never made.

Then what reason have you for supposing that such reports would ever be made?—I never received any such.

In point of fact then, you have no further control over your agent at those houses at which you are not constantly present, but such as may arise from information which may reach you by chance?—I have no other.

On what grounds do you place such a complete confidence in Mr. Jennings?—He has been many years with me, and I have great confidence in him.

What was his education?—A common education.

Before he came into your service, was he in any manner particularly adapted for or at all experienced in the management of lunatics?—He had been a keeper for a length of time.

Had he been a keeper before he came into your service as agent?—I do not know.

Had he a medical education?—No.

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What was his situation in life before you appointed him your agent?—He was brought up in that business as a keeper.

Do you mean to say, that he had served as keeper elsewhere before he came into your service as your agent?—I do not know.

Then what do you mean by saying that he was brought up in that line of life?—He had lived in that establishment.

From what age had he lived in your establishment?—I should suppose three or four-and-twenty.

In what capacity did he live there before you appointed him your agent?—Keeper under the direction of Mr. Talbot.

How long did he serve with you as keeper before you appointed him to the office of your agent?—Five years, I think.

You state, that you have turned your attention to the curative process of mental disorders?—I have.

Do you apply your own knowledge with regard to this curative process to any of the patients under your care at the White House or at the Hoxton establishment?—I do.

How do you contrive to apply your knowledge as to the curative process, when you have already stated to the Committee, that the only attendance you give to that establishment at the White House, consists of two hours in the week?—I only apply it by examining the patients as other people do; I presume that my knowledge of insane cases is equal to any man's in England.

Without doubting your knowledge, the Committee merely wish to ask how you contrive to superintend the curative process of 500 patients by merely visiting them two hours in the week, having during those two hours all the other duties to perform which fall upon you as proprietor of the house?—I place confidence in Mr. Jennings as to provisioning the house, seeing those provisions myself, which are of an excellent quality; that part I do not take any interest in beyond deputing to him the direction of it, and seeing to it myself after that is done.

If you yourself are supposed to superintend the curative process used for the recovery of insane persons, how do you contrive to do that, only visiting your house two hours in the week?—I conceive the surgeon to be the person, whose constant attention in that way is essential, and he does it at his visitations; but with regard to myself, I see the patients and examine them, and if I see it necessary, give directions accordingly.

And that you contrive to do only visiting your establishment two hours in the week?—A very short time does for a number of insane patients, many of them being of an incurable nature.

What medical attendance, if any, is given, which medical attendance is directed to the cure of the mental afflictions of your patients, besides that of the regular surgeon and your own superintendence?—None; if it were necessary for a physician to be called in, he always is.

What physicians ever have been called in?—Doctor Frampton frequently, and other physicians occasionally.

Is that with regard to the mental or the bodily disorders of your patients?—To the bodily, principally.

Can you give the Committee, either generally or for any specific time, any idea of the proportion of patients who come under your care, who are discharged cured?—I have given that account in, and I vouch for its correctness.

Whenever a fresh patient arrives in your house, do you consider it part of your duty to examine him particularly, so as to decide upon the future treatment both of his body and of his mind?—The surgeon does; every patient is introduced to him immediately.

Giving you the credit of being the person most skilled in the cure of mental disorders in the county of Middlesex, do you give the benefit of that skill to every patient upon his being introduced into your house?—In most cases.

Can you take upon yourself to say, you have never had any patient in your house without applying your own knowledge and your own skill to the benefit of that individual?—I cannot.

As the medical man only comes every other day, a patient may be twenty-four hours without being visited by a medical man when he first comes in?—It is possible.

Is there any classification of patients among the pauper lunatics of your establishment in their day rooms?—Certainly.

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To what extent?—There are three day rooms; one for the violent, another for the more quiet, and another for those who are infirm in bodily health. They are divided in that way; but the orderly ones frequently go into the other parts of the house.

Then there is nothing to prevent a convalescent patient from being in the room with a more violent patient if he thinks fit?—If he chooses to go there, he can.

Then, in point of fact, the distinction of classes is not strictly maintained?—Not at all beyond that stated of the violent patient; he is kept from the others.

Is he then confined?—He is kept in a distinct room.

But the orderly patient, if he pleases, can mix with a violent patient; why cannot the violent patient also mix with the orderly patient?—He is prevented, if necessary, by the servants.

Will you have the goodness to state what variation of food takes place in that establishment with regard to the health and state of the pauper patients?—Sago, panada, wine, arrow root, beef tea, mutton broth, and food of that description.

You mean that that food is administered to pauper patients in your establishment when required?—Always.

Can you state whether any, and if any how many, pauper patients in your establishment at the present moment are placed upon that sick diet?—I cannot tell the number; all such as require it, I am sure are so treated.

Do you believe that any pauper patient in your establishment at the present moment is placed upon that sick diet?—I am positive there must be a great number, because it is constantly ordered if required.

Is there any written report kept of those persons who are removed from the common diet to the sick diet?—Certainly.

Does Mr. Jennings make to you a written report of the persons whom he removes from the one diet to the other?—Not written, a verbal report.

Is that variation in food made by your directions?—Frequently.

When do you give those directions?—When I see the persons.

Upon your periodical visits?—Yes.

But the surgeon makes his report also?—Yes.

But no written report?—No.

Have you any written document in your establishment which you can produce before the Committee in confirmation of these statements?—No.

You state that there are 800 patients under the care of the surgeon in the two establishments; now if those variations of food are made occasionally, how do you know that each man gets what he ought every day without any written document?—I rely upon the superintendent of the house.

Can you suggest any objection to there being kept a written register of the medical treatment of every patient in the establishment?—No objection.

Can you mention the name of any pauper patient in your establishment to whom this sick diet has ever been given?—The number is very great, I am sure, who are under that diet; I cannot particularize them.

Who purchases the food generally for the establishment?—A regular butcher serves the house with the very best food that can be, under the direction of Mr. Jennings.

Do you pay the bills yourself, or do you allow a certain sum to the superintendent for the payment of all bills?—The bills are paid regularly by Mr. Jennings.

You stated that your patients were divided into three classes; do you consider that any further classification is necessary or desirable?—Three I should consider quite sufficient, independently of such as are sick and in the sick-room.

When you speak of a sick patient, what do you precisely mean; do you speak with reference merely to his bodily health, or to the state of his mind?—With reference to his bodily health.

With respect to those whose bodily health is good, but whose mind is affected, do you make any variation of diet?—The variation of diet is according to the nature of the case; one patient requires a different diet from others.

Are you aware yourself of the different diet that is given in each case?—I am aware that that is directed.

You have stated, that although there are a certain number of pauper patients who receive a sick diet; you are not able to particularize the name of any one who has so received it; can you mention the name of any pauper patient who has received it?—I would suggest that the Committee would examine Mr. Jennings to those points.

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Does salt meat form any part of the regular diet of the patients?—Only once a week.

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How many regular keepers, not patients, have you in your establishment at Bethnal Green?—Five men and five women.

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What are their names?—There is one Dalby, another Barker; the names of the servants I seldom inquire into, although I know the people when I am there; that is in Mr. Jennings's department.

Then in point of fact, ten servants, five male and five female, are the whole of your establishment?—There are five appropriated to the pauper men, and five to the pauper women.

Who are not patients themselves?—Who are not patients themselves.

How long have five been appointed to the pauper men and five to the pauper women?—For years; Mr. Jennings will give the names of each.

What other servants have you in your establishment?—There are four other men; there are nine, two keepers besides the porter and house servants.

Are they patients?—Not one patient is a keeper; they are never desired or made to attend to any patient, it is done for the benefit of their health, and the promotion of their cure.

What number of male servants have you in your establishment?—I should think fifteen male servants.

Will you have the goodness to give their names to the Committee?—Mr. Jennings has the names of the servants.

You state that the pauper patients are never employed, except by their own wish and inclination, in attendance upon other persons?—Never.

Have you not in your establishment, to every crib-room, what is called a crib room man?—No.

You mean to say, that to each crib-room, there is not a convalescent patient who is appointed as a crib-room man?—I do.

Do you mean, that in no instance, is there a convalescent patient appointed to the duty of crib-room man?—I do.

Do you know, of your own knowledge, the manner in which your crib-room patients are placed at night in their cribs?—I do.

How long is it since you ever saw at night, the violent patients placed in their cribs?—That I leave to Mr. Jennings.

Did you ever witness the manner in which those persons are so placed?—Repeatedly; I have repeatedly gone to them.

Within how many years have you done so?—Within less than years or months.

Then the Committee are to understand, that although you stated before, that you only visited your establishment on Tuesdays and Fridays, from ten to eleven o'clock occasionally, you have visited your establishment at other periods?—I have visited it at other times.

Have you ever visited your establishment at the period when those patients were so placed in their cribs?—I have.

Can you state positively, of your own knowledge, that it is not a fact that a convalescent patient is appointed as a crib-room man, and that the business of that crib-room man is to undress the crib patients, and to put them in their cribs?—That question can be better answered by Mr. Jennings.

If you have been present yourself at the placing of the patients in their cribs, the Committee wish you to answer whether that is or is not the fact?—I did not see them put to bed.

The Committee understood that you had been at the house at the period when the crib patients were placed in their beds, and that you yourself had seen the manner in which they were so placed?—I have seen them in their crib beds, but never saw them placed there.

Then you do not know by whose direction, and under whose superintendence they are so chained down, and placed in their cribs?—That part is under Mr. Jennings's direction.

Do you not consider yourself as proprietor, responsible for the treatment of the patients?—I do.

Then if you should understand that great neglect had taken place, should not you consider yourself to be culpable?—I should.

If great cruelty occurred, should not you consider yourself blameable for it?—I should.

If that be the case, unless you take greater care to examine this establishment than

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than you appear to have taken, how can you ascertain whether cruelty or neglect takes place or not?—My confidence is in Mr. Jennings.

That is your only security?—That is my chief security.

Then are the Committee to understand, that whatever Mr. Jennings may hereafter state to the Committee, about the treatment in that house, you will abide by?—I have that confidence in him, that I am sure he would not use any person with cruelty or hardship.

Then whatever Mr. Jennings may hereafter say, as to the treatment of the pauper lunatics in your house at Bethnal Green, you consent to abide by his answers?—Yes.

What you state with respect to maggots not being found in the cribs, and with respect to cold water and mops not being applied to the patients in the winter, and other things of that sort, you state entirely upon the report of Mr. Jennings?—Upon Mr. Jennings's report to me.

Therefore, when you deny that those things have ever taken place, you cannot deny them of your own knowledge, but you merely deny them from the report that you have had from Mr. Jennings, and the confidence you have in Mr. Jennings?—I do.

You do not speak from your knowledge, but from what you have heard from Mr. Jennings?—In part from my own knowledge.

You speak principally from Mr. Jennings's authority?—I do.

It is presumed that you never saw the patients washed on a Monday morning yourself?—Never.

Then of your own knowledge you cannot deny the fact that they are mopped down with cold water?—Of my own knowledge I do not.

Then what induces you to deny so positively those assertions in the statement that you have sent in to the Committee?—The confidence I have in the superintendent.

Then you think yourself justified in positively making those statements, contradicting the evidence that has been brought before this Committee, not from knowing the truth of those contradictions yourself, but because you have confidence in Mr. Jennings, and Mr. Jennings states that they have not taken place?—I state, that with respect to the treatment of the patients generally, the instructions to Mr. Jennings are that nothing shall be wanting, and I rely upon him.

Are the answers you have made to this statement, to certain matters of charge against the management of your establishment, founded upon your general confidence in Mr. Jennings, or are they given in consequence of your having had direct communication with him upon the subject matter of the charges?—My own observations upon the general treatment of the patients, when I go round, is satisfactory to me, as far as that goes.

You have seen the evidence that has been already given before this Committee?—I have.

You are aware that in that evidence there are certain charges against your establishment of mismanagement, neglect, and cruelty?—I am.

In the answer you have delivered in to the Committee, you deny those charges?—I do.

Is that denial founded upon your general confidence in Mr. Jennings's management, or upon your having ascertained upon direct inquiry that the charges are unfounded?—From having ascertained from inquiry that they are unfounded.

Since you have seen the evidence that has been taken before this Committee, have you referred to Mr. Jennings upon the points in question?—I have.

And the result of that reference to Mr. Jennings leads you to make the answer you have delivered to the Committee?—It does.

You are aware that it is stated that it is the practice to confine persons in their cribs from the Saturday, and leave them there till Monday; is that statement true or not?—Not in the way it is given, that they are confined there, and remain there without being removed; they are got up and cleansed, and put to bed again; and none are allowed to remain there if they desire to get up.

What is your reason for confining them from Saturday to Monday?—The confining of lunatics of a violent description is necessary, and beneficial to them.

Is it peculiarly beneficial on a Sunday; would it not be equally beneficial to confine them on other days of the week?—It would be equally so on any other day.

How does it happen to be your invariable practice to confine them only on one day of the week, and that always the same day?—I conceive that the confinement in

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in that way of the violent and outrageous patients is beneficial to them, and that particular day is a day when there are no visitors come to disturb them; and they are more composed on that day than on days when there are visitors coming to the house.

Would it not be important to confine them on other days of the week?—Frequently violent lunatics require to be confined.

That occasional confinement may be necessary in cases of violence, the Committee understand; but what they do not understand is a system of periodical confinement, limited to one day in the week; can you give any explanation of that?—I do not know any reason beyond that the only patients who are confined on those days are the violent ones and the dirty ones.

What the Committee wish to draw your attention to is, that there is no distinction in this case; it seems to be done indiscriminately, for to all the patients who are called crib patients that practice of periodical confinement is applied?—Certainly not; it is only to the violent ones.

The Committee understand that all patients who are called crib patients are periodically confined from Saturday to Monday?—They are not; only the violent ones.

Then all violent patients are confined on that day?—They are.

Do you not think it possible that that confinement from Saturday to Monday has taken place in your establishment for the sake of the convenience of the keepers?—Never.

You said just now that all violent patients were confined from Saturday to Monday?—A number of the violent patients are; the crib patients only.

Do you conceive that the confinement of a violent madman once a week is a good thing in itself, whether he wants it or not for other reasons?—I conceive that the confinement in bed of a violent madman is beneficial to him, and the best mode of quieting and composing him.

Even when that is applied not as occasion requires, but periodically, once a week?—No, not more than at any other time.

Why then do you make it a practice to confine all violent crib patients in your establishment from Saturday to Monday?—I can assign no particular reason for it; perhaps Mr. Jennings can tell the Committee.

If such were the practice, it would be a very great abuse, according to your ideas, since you can assign no reason for it?—Unnecessary confinement at any time is an abuse.

If all the violent crib patients in your establishment are confined from Saturday to Monday, do you consider that an unnecessary confinement?—I consider it necessary to confine them.

Do you consider it necessary to confine all violent crib patients in your establishment from Saturday night to Monday every week?—They were not confined under my direction certainly.

Do you consider it necessary?—[*The Witness hesitated.*]

Do you decline answering the question?—I do.

The Committee wish to ask you, upon your professional reputation with regard to the treatment of insane persons, whether you do not consider the indiscriminate confinement of furious persons a bad mode of treating them?—Indiscriminate confinement I should think not correct.

Will you have the goodness to state on what Sunday you have ever been present at that pauper asylum for lunatics standing in your name at Bethnal Green?—I very seldom go on Sunday.

Have you ever been there within the last twelvemonth on a Sunday?—Yes, repeatedly.

Will you mention any particular Sunday on which you were there?—Three months ago perhaps it is since I was there on a Sunday.

When you were there three months ago, on a Sunday, did you go into any of those crib-rooms?—Certainly I never did; I left them to the management of Mr. Jennings.

You have a great number of private patients of the same description of madness; do you confine them every Sunday in the same manner in which those pauper patients are described to be confined in your house at Bethnal Green?—No.

Is madness so different with regard to the higher and the lower classes of society, as to render that treatment good in the one instance which is bad in the other?—It is not.

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Then do you not consider that it is a very extraordinary circumstance that the pauper patients should be treated in this manner on a Sunday at Bethnal Green, when your system is directly contrary with regard to other patients more immediately under your own charge?—That part of the Bethnal Green establishment is under the direction of Mr. Jennings.

Do you consider yourself as responsible for Mr. Jennings's conduct with regard to those persons for whom you contract to provide properly?—I do.

Then if that statement is correct with regard to the treatment of those pauper lunatics at Bethnal Green, you acknowledge that a very improper conduct has been pursued?—I do not admit that it is intentionally improper.

Is it, in your opinion, right or wrong, that such treatment should be shown towards those lunatics?—I do not think it wrong where the necessity of the case requires it.

Do you consider that necessary universally with regard to paupers which is not necessary with regard to persons in a higher station in life?—I do not.

Did you ever know that those patients were confined during the whole of Sunday till your attention was called to it by the inquiries that were going on?—I did not.

Then till within the last three months you did not know that those patients were so confined?—No.

Has this circumstance which has now come to your knowledge weakened your confidence in Mr. Jennings?—It has.

The Committee understood you to state that you had the most perfect confidence in Mr. Jennings?—I had previous to that circumstance coming to my knowledge.

And that circumstance coming to your knowledge has weakened your confidence in Mr. Jennings?—It has, very much.

Is not your confidence so far weakened in Mr. Jennings, as to make you doubt many of the explanations which he may now give you relative to these charges which are made?—No.

Notwithstanding your confidence in Mr. Jennings has been weakened by the discovery of that circumstance, you still have such confidence in Mr. Jennings as to believe all the statements he makes to you?—I should believe any thing that Mr. Jennings says in that respect; Mr. Jennings did not communicate to me that the patients were so confined, and I did not know it.

Then if Mr. Jennings has concealed from you that which you are now willing to acknowledge to be an abuse, is it not extremely possible that Mr. Jennings may have concealed other abuses from you?—I think it possible.

And though you think that possible, you still continue your confidence in Mr. Jennings, and you still continue him as the superintendent of your house?—I do.

Will you explain to the Committee, whether, notwithstanding your confidence has been so diminished, it is still your intention to continue Mr. Jennings as the superintendent of your establishment?—Perhaps I may, but I have not made up my mind as to that; a great deal has been exaggerated through the whole business.

And yet although Mr. Jennings has lost so much of your confidence that you even now begin to doubt whether you shall continue him as the superintendent of your establishment, you place full confidence in Mr. Jennings that all the statements he makes in answer to those charges are correct?—I should not doubt their being so.

Because you have already stated to the Committee that whatever Mr. Jennings shall state before them you are willing to be considered as responsible for; now do you reconcile to the Committee that confidence in Mr. Jennings with regard to those charges, with the fact which you now state of that confidence having been diminished by discovering that he, Mr. Jennings, had permitted those abuses to exist?—From the confidence I have so long placed in him, I should not doubt any observation he might make; he never communicated to me, certainly, the circumstance of their being confined on Sunday.

You have stated to the Committee, that the patients, though so confined on the Sunday, are taken up and washed in the morning; that information you received from Mr. Jennings?—I did.

And although your confidence in Mr. Jennings is greatly diminished by the concealment of those abuses, you believe that explanation which Mr. Jennings has given to you?—I should not doubt his veracity; he has concealed that from me certainly, but I never found him state an untruth.

Will you have the goodness to state whether you did not positively refuse to the guardians

guardians of the poor of Mary-le-bone permission to visit their patients on a Sunday?—I never did; I never was asked it; it was only at night that I refused.

You have stated that you do not subject your private patients to the same discipline on a Sunday to which the crib patients have been subjected in that establishment?—If they were as violent as those I should.

If they were subjected to that sort of treatment you would consider that sort of treatment inhuman, would you not?—Not if they were as violent as those who are confined.

Do you mean to say that any of your private patients, being violent, would be confined by a chain in bed, from Saturday afternoon to Monday morning?—The private patients are never chained.

Then how do you justify the having chained the pauper patients in your establishment?—The pauper patients of course are not under the same sort of discipline as the wealthier patients; I assign no other reason than that.

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Mercurii, 20^o die Junii, 1827.

ROBERT GORDON, ESQUIRE,
IN THE CHAIR.

Mr. Thomas Jennings, called in; and Examined.

HOW long have you been superintendent of Mr. Warburton's establishment at Bethnal Green?—About nine years.

How were you employed before you were superintendent of this establishment?—I was a servant there, a keeper.

How many years have you been a keeper to that establishment?—I went there in the year 1809, consequently I have been in the establishment eighteen years next July; therefore I must have been a keeper about nine years.

What had been your occupation before you went into Mr. Warburton's service?—My father was a farmer and is now.

How were you employed in early life before you came into Mr. Warburton's employment?—I was employed with my father till my mother died; my father married again and I left him.

You came up to London and entered Mr. Warburton's service direct?—Yes, except one year, when I lived in King-street Cheapside in a Manchester warehouse.

Had you ever any medical education?—Never.

Then all the knowledge you possess as to the treatment of insane persons has been derived from your residence at Mr. Warburton's?—Yes, from constant practice, and attending on them for nine years.

Will you have the goodness to state to the Committee the nature of the medical care of the patients in Mr. Warburton's establishment?—They are attended every other day by a gentleman of the name of Dunston, and almost every other day by Mr. William Daniel Cordell, who lives in Broad-street.

Does Mr. Cordell attend as the friend of Mr. Dunston, or does he attend in addition?—Mr. Cordell has private patients in the house, and he frequently calls to see them, and many medical gentlemen send patients there and call to see them, and Mr. Cordell does so too; and being a friend of Mr. Dunston's, he calls when he does not, and if there is any case that wants to be shown to any medical man it is shown to him.

If he comes?—Yes.

But the only regular medical attendance you have is Mr. Dunston three times a week?—Yes, three times one week and four times another.

What time does he come?—Generally from eleven to twelve, or from twelve to one; a medical gentleman cannot come to a moment.

How long does he remain?—It depends upon the number or quantity of patients he has to see, sometimes he is there an hour and a half, sometimes not so much, sometimes more.

Upon the average he remains an hour and a half in your establishment?—Upon the average I might say two hours.

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Have you any other medical attendant except Mr. Dunston?—No, not paid by the house; the medical gentlemen of each parish come to see their patients so many times in the year.

Is Mr. Dunston in the habit of visiting on the Sunday?—If the day falls on a Sunday, every other day he comes.

Does he see all the patients?—All that are necessary to see, he does not speak to every one individually, but all that are under his care or which require attention, he looks at them and speaks to them.

How does he ascertain the fact that they want attendance?—From seeing the patients and visiting them.

I am to understand he sees every one of the patients on every visit?—Not every one, he goes through the rooms.

Upon every visit?—Yes.

Does he see them sufficiently to ascertain whether they require any peculiar attention, or does he only see them without that sort of observation to enable him to form a conclusion?—He sees every one that requires medical attention; if there is any one that requires it since he was there before, he is pointed to it.

His attention is directed to it by you?—Yes, but he looks round and judges for himself.

About once a fortnight he attends on Sunday?—Yes, it is not always he comes on the Sunday; sometimes he requests Mr. Cordell to come for him.

But either he or Mr. Cordell comes once a fortnight on a Sunday?—Yes.

Does he go into all the rooms where the patients are cribbed?—If necessary, not always.

Many Sundays may have passed in which he may not have seen the crib patients?—Yes.

It is entirely in your discretion whether those crib patients ought to be confined or not during that day?—Exactly so.

No medical man sees those patients in the course of the day?—If necessary.

Not unless you call his attention to it?—No.

Do you mean to say that Mr. Cordell visits for Mr. Dunston, or that when he pays his visits it is on the intermediate days?—If he visits instead of Mr. Dunston, it is upon the days that he should visit.

If on any other days it is a matter of gratuity?—Yes; but if there is any case of necessity it is pointed out to him.

Are the pauper patients mixed with the private patients?—No.

As far as the pauper patients go he might as well not be in the house?—He is called to it if there is any that require it.

But he never sees them unless his attention is called to them?—If he comes for Mr. Dunston he sees them as Mr. Dunston does.

Are there not complaints of a very sudden and dangerous nature to which lunatics are subject?—Yes.

More so than ordinary men?—We may say the more so, when a person is afflicted in mind the danger must be greater than when afflicted only in body.

Are there not diseases with which they are suddenly seized?—Yes.

What sort are they?—They sometimes want bleeding.

What are the diseases?—That I had better refer you to the medical man, for I stated I was not a medical man.

You would not take upon yourself to afford any medical relief to a patient without consulting some medical man?—No.

Your being in the house does not supersede the necessity of medical attendance?—No; I immediately send for a medical man if I see any necessity.

You would not take upon yourself, in a case of sudden indisposition, to afford medical relief, without consulting a medical man?—Decidedly not.

You say you have no medical knowledge as to the body, have you any knowledge as to the care of lunatics, as to the mind; not by the administration of medicine, but other attentions which persons who understand lunatic patients generally administer?—Yes, I think I have.

Have you an idea that certain courses of and proceedings will alleviate insanity?—I certainly have.

Do you consider diet of any importance with regard to insanity?—Yes, I do; at least I consider the diet of importance, if the bodily health is disordered as well.

Diet has some effect upon the bodily health?—No doubt.

Then as the bodily health has an influence upon the mental health, the diet must be

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be of some importance as to mental health?—If a person is in a good state of health, our system is to feed them well, and keep them clean and comfortable; and if the patient is not in a good state of health, he has things suitable, beef tea, sago, arrow-root, or what is necessary.

There are different sorts of insanity, some violent and some melancholy and mopish?—Yes.

Do you consider the same diet fit for all?—Yes, if the bodily health is good.

You think the same diet is fit for all persons, if the bodily health is good?—Yes.

You say Mr. Dunston calls on the Sunday?—Every other day.

And he sees the crib patients, if necessary?—Yes.

Does he go to the room where the crib patients are?—Yes; all medical gentlemen go to the room, they have always done so.

Then I am to understand that Mr. Dunston has been on the Sunday in the crib-room?—I have no doubt of it.

Do you mean to say, Mr. Dunston has been in the room where you have confined your crib patients all day on the Sunday?—Yes; he has not been there all day.

Do you mean to say that Mr. Dunston has seen that it is the practice of your house to confine the patients all day on Sunday?—Yes.

As to the paupers, they are attended by the parish medical men?—Yes, for every large parish.

How often do they attend?—Not all the same number of times; Mary-le-bone medical board used to attend twelve times a year.

Have you paupers from parishes out of London?—Yes.

Is there any medical man attends them?—Our medical gentleman.

There is no sort of person who looks after them?—Not regularly; though it is a common practice that the parishes will send a gentleman once or twice a year from the country, not if the patient comes an immense distance.

Medical persons?—Yes.

Is it more frequently a parish officer than a medical man?—Yes, rather more so.

You say it is the practice to give sago and arrow root and beef tea where necessary, is that given to the pauper patients?—Yes.

Do you keep any minute of the sort of food supplied to patients?—No.

Can you state any poor patients who have received this improved diet in the last year?—I really do not know that I can; it is a thing I never supposed I should be asked, and I never take any notice of it.

Can you name any one person now out, that we can examine?—I really do not know that I can.

Can you name any one person, a pauper lunatic, upon your establishment, during the nine years that you have been there, who has received that food?—There are many, but I cannot name any one.

A man of the name of Ferguson, did he ever receive any?—He came from St. Pancras.

Did he ever receive any improved diet?—Yes, he did.

Did Mr. Dunston ever give direction that any pauper patients should receive such improved diet?—Yes.

Can you mention the name of any one?—Not supposing I should ever be asked the question, I cannot.

If you can say he has frequently done it, you must recollect some cases?—I do not say that I cannot, nor that I can; Mr. Dunston may come round, and say there are six people who may receive such and such diet.

He must have described the persons to whom it was to be given, and by name, or you could not have known them; what the Committee asked you is, to name any one person in your establishment, to whom this sick diet is given?—If I was to go home and look over my books, I could remember.

I thought you said you kept no books?—We must keep books with the patients.

The Committee understood you to say, that you made no entry of the food given?—By looking over the books with the names of the paupers from different parishes, I can recollect that this patient or that received sick diet.

Are you personally acquainted with all the paupers on the establishment?—Yes.

You know them by name?—Yes.

And yet you cannot recollect the name of any one put on this diet?—No.

What benefit would it be to you to look over your books containing a list of names,

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names, you could only see the names?—If I look over the book, I could know the state of health the patients were in.

But you could only recal to your mind the name of any person you cannot now recollect?—Frequently a servant comes in for it on an evening, for gruel and something in it.

The question put to you was this, can you give to the Committee the name of any individual of the pauper patients, who at any former period or the present time, is receiving sick diet?—I will give you a list to-morrow.

That is not the point; can you now?—No.

You keep books of the expenses?—Not of the things we give out in this way.

Of the amount of articles you purchase; how much sago and arrow root do you buy in?—We buy it, perhaps, in great quantities.

Do you keep any account of the articles you purchase for your establishment, sago and arrow root?—We buy it in great quantities from Apothecaries Hall; perhaps we buy enough to last us three months.

And you have some book containing that account?—No, we have not; we pay money for it.

Nor containing the payment?—Not arrow root alone; we buy many things at a time.

The articles purchased for the sick patients; have you any memorandum containing an account of the articles you purchased, and the expense you have incurred?—No.

When you purchase, where do you purchase the sago and arrow root?—Mr. Dunston sometimes sends them to us, and sometimes we go to Apothecaries Hall.

Do you pay ready money for it?—Yes.

During the last week, have you had any of the pauper patients upon this diet?—No, I do not think we have; they are in a very good state of health.

The week before that?—Yes, I think we had.

Can you recollect the names of those persons?—No, I cannot.

If you keep no regular account of the disbursements of your establishments, how do you account for the payments you make?—We keep an account of the bread and meat; but when I go and buy a quantity of arrow root, I pay ready money.

You must account for the sums you pay?—Yes, in the cash book; it is entered as sundries. Sometimes I go out and buy a dozen different things, I say sundries three or four pounds.

Is Mr. Warburton satisfied with that?—Yes.

Can you furnish the Committee with an account of money spent in the purchasing of those articles?—No, I cannot.

And you cannot furnish the Committee with the name of any person of whom you have ever purchased those articles?—None, because I always pay ready money for them.

Can you state where you have purchased them; where you have purchased those articles?—At Apothecaries Hall in general, if Mr. Dunston does not send it.

When you purchase those articles, do they give you any invoice or bill?—No; I do not think they do it to any body, unless they keep an account; I never saw them give a bill.

Do they not sum up the items on a piece of paper?—On the outside of one of the articles, if you buy more than one.

Can you state the amount in each three months, or each year, of those extra articles of food, what they came to?—No; it would be a difficult thing for me to state it at all. When I go out to buy two or three things, I enter the whole sum.

I want to know the amount you pay in the course of twelve months for all those articles of food, exclusive of your ordinary diet?—I am sure I cannot furnish such an account.

Then, in fact, under the head of sundries, all sorts of items are included?—Yes.

Not belonging to this extra food?—Yes; sometimes clothing; three or four, or half a dozen hats or shoes.

That is the way you account to Mr. Warburton?—Yes.

Do you supply your pauper lunatics with clothing?—Yes.

From what parishes?—Not any large parishes, only from single parishes; I mean where we have a single patient. Yes, we do furnish Saint Clement Danes with clothing.

You

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You have a regular dietary for all the pauper lunatics?—Yes, regular food.

The same one week as another?—Yes.

How often do you give salt meat in a week?—We seldom give them salt meat, except on the Sunday; they have sometimes corn beef on the Sunday, and some times mutton.

The mutton is not salt?—No; and the beef is generally salted on the Thursday, therefore that is very little salt.

What sort of meat do you give when not salt; the best joints or the middling?—Clod, free from bone.

That is a very inferior sort of meat?—I do not consider it so.

Is it so good as the best joints?—Every bit; it is not so fine to the eye, nor such as a gentleman would buy.

Is it easy of digestion?—I should think it is.

What have they for supper?—Bread and cheese and beer.

You state that the knowledge you have obtained relative to the care of mental disorders, has arisen from the long time you have been in this establishment?—Yes.

Do you ever exercise the knowledge you say you possess as to the treatment of mental disorders, in promoting the cure of any of the patients submitted to your superintendence?—I certainly do.

In what way?—By classing them as well as the nature of the establishment, and the keeping them together, not allowing one in a raving way to be with a melancholy one.

Is the only attempt made on your part to promote the cure of patients, to endeavour to remove one class from another?—Yes, and keeping them well bedded and cleaned, and washed and comfortable; and as to the other part of the curative process, I leave it to the medical man; I do not know what it is administered for, but I take care it is administered according to the order.

You never employ your own skill to promote the cure of those patients?—Not as far as regards medicine.

You state that the only point to which you have turned your attention is the classification?—Yes, attention to the cleanliness and comfort.

Will you state what classification does take place of the pauper patients during the day and night?—Those that are very violent, we place in a room by themselves, and those who are convalescent, or more mild and tranquil in the nature of their disorder, they are in a room by themselves.

How many rooms have you in your house?—Three for male pauper patients.

Do you mean that there is a separation in those rooms of patients suffering under different degrees of their malady?—We cannot separate, in three rooms, every case or degree, but as far as practicable, we do.

Is there any one room in your establishment, of the day rooms, entirely confined to violent patients, and into which room no convalescent patient is permitted to enter?—No; because although there is one room the further side of the ground, and the most violent patients are put there, still the convalescent patients can go in, if they think proper.

Then there is no classification in your day rooms?—Not shut up completely.

You do not mean there is any one room in which violent patients are confined by themselves during the day?—No; others have access to them.

Is there any one of those three rooms into which no violent patient is permitted to enter?—No.

Then in all the three rooms of your establishment, violent patients and convalescent patients are equally permitted to enter?—No; we generally keep the most violent over number seven.

Are all the violent ones kept there?—Yes, as well as we can, but if we merely confine them in their hands, they frequently walk out; we do not always keep the patients leg-locked, that is, confined to the floor in the room.

There are three day rooms, numbered?—Yes, one is called number seven, the others are not numbered; it is the first room which you enter, and then there are the small rooms for patients not in a good state of health, but not ill enough to be kept in the infirmary.

What is the other?—It is the large room.

In the first room you enter, are violent and wet patients admitted?—They may come in when they are permitted to walk out for the benefit of the air; there is often a few of them in, but they do not stop there.

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In point of fact, there is no classification?—We have no room for shutting the patients in when in a violent state.

You say they are not permitted to stop, what is to prevent them?—The servant would take them back to their own rooms.

Are the servants always about?—Yes.

How many have you?—Five to attend the male paupers.

Will you give the names of those five?—William Barnard, Thomas Dolby, Charles Beach, James Essex, and Samuel Painter.

Are those five regular servants?—Yes, five regular servants, paid for by the establishment.

What is the name of the servant who occasionally assists, and whose regular business is to groom?—Thomas Cooper.

How long have you had five servants?—We have always had five, it is our number; sometimes we discharge a servant, and could not get another for a week or a few days.

How many had you at Christmas last?—I believe the same number.

Regular servants?—Yes, I think so, I am not certain.

Recollect yourself; how many had you at Christmas last?—We had three; of those we have now, one is gone away since. I am not sure whether we had four or five.

Are you quite sure you had four regular keepers in attendance upon the pauper male patients?—Yes, quite sure; I am confident of it.

No one of them a convalescent patient?—No; one servant we had has been a patient some years back, but is as free from disorder as any person now, or as he was before; he came back, and we hired him as a servant, and have paid him regular wages for six or seven years, and a most excellent servant he is.

When you speak of four servants, do you speak exclusive of the porter at the gate?—Yes, he has nothing to do with the patients; and we have a cook that has nothing to do with the patients, and a bread-cutter.

You mean, at Christmas last you had four regular keepers in attendance, besides the groom and the porter at the gate?—Yes, exactly so; the impression on my mind is we had five.

Solely in attendance upon the pauper lunatics?—Yes, and for no other purpose; they never go out of the place; they get the patients up, and make those beds in the crib rooms, the two servants who have the care of the paupers.

None of the patients are employed?—They frequently assist the convalescent patients.

You have stated there are three rooms for the classification of male prisoners; have you an infirmary for the sick male patients besides?—Yes.

More than one infirmary?—One for the men, and the other for the women.

Have you any means of separating an outrageous patient from a quiet one, supposing he is sick?—No; we have no classification in the infirmary; we have a sitting room in the infirmary.

How many yards have you for the pauper patients?—Two.

Are they confined to any particular class, or open to all classes?—One is for the male, and the other the female; the building runs between them.

Speaking of the male paupers, is this one room open to lunatics under all kinds of lunacy?—Yes, if they are fit to walk out.

How many male paupers have you?—I cannot exactly remember it now; we are under one hundred now, I believe.

Do you mean to say, with those pauper lunatics there are no other class of patients?—Certainly not, unless it is any one sent from the county, if they pay the same price.

Are there private patients with those pauper lunatics?—If they pay the same price.

You have those three rooms?—Yes.

Are you at all aware there is a particular order of the commissioners that all your rooms should be numbered?—No, I am not.

Did they never remonstrate?—The rooms were numbered eight or nine years back, which, I believe, originated in the order of the College of Physicians; but since that we have whitewashed and painted, and obliterated the numbers, and they have never been put on.

They

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They have never made any inquiry?—No; they have seen the number upon one of the doors, perhaps.

Can you tell us how many sick patients you have now?—There are three, I believe; I do not call them bodily ill; they are paralytic cases that are in the infirmary.

What is the greatest number of sick patients you have had at any one time?—Very few; they have been in a very healthy state; there have been as many of them as six or seven, but they are chiefly there from paralytic causes; we have had no contagious disease ever since I have been there.

Do you keep any minute of the names of the persons sick at a time?—No, I do not.

How is it communicated to Mr. Warburton?—He is in the habit of going round the house twice a week, or Doctor Warburton, his son, and seeing them.

How long is Mr. Warburton in the house?—It depends upon circumstances; sometimes an hour or an hour and a half, sometimes two hours or more.

Do you mean to state it often happens that he is there more than an hour?—Yes, oftener more than less.

Does he go over the whole of the establishment?—Yes, except the bed rooms; he does not go over them every day.

Do you consider an hour and a half as sufficient to visit the establishment, and ascertain the state of those who are sick?—It is sufficient to go through the rooms, but not if you are to speak to every patient individually; but in going through this room, he could see in five minutes whether they were all well, and if not, ask what was the matter.

How often do you go round?—Every day; and there are very few days, except when I am called out on particular business, as here, that I do not go round six times.

On the Sunday?—Yes.

How often are the females visited on the Sunday?—By Mrs. Jennings, or her sister.

Are you never absent from the establishment?—Never together; Mrs. Jennings and myself have never been absent, except once or twice; once when we went to the play, and then Mr. Talbot stopped in the house for us.

Have you not a place at Woodford Bridge?—Yes, for my children, but we are never out together; sometimes I go, and sometimes Mrs. Jennings.

You mean to state to the Committee, that you yourself or Mrs. Jennings see every patient in the establishment every day?—Yes, I do, and when I go out, I see the patients before I go; I take the children to church at about half past nine, and I have always been round the male part of the establishment once or twice before that.

You have told us all the patients can obtain admission into this large room by the garden, except those that are leg-locked; will you explain about the leg-lock?—We do not do it by numbers, only when necessary; sometimes there is not one, sometimes a dozen.

When is it necessary?—When they are in a very high state.

Have you any leg-locked now?—Very likely there may be; there was not this morning.

Do you know whether that is the practice in Bedlam?—I believe it is; I do not know that we ever had a dozen, but I would rather say more than less.

You say Mr. Warburton's visits are twice a week?—Yes; or his son, the doctor.

Regularly the same days?—Tuesdays and Fridays.

Sometimes Mr. Warburton does not come every week?—No, not always; since the Doctor has been in the habit of coming, he has not always come.

Generally about the same hour in the day?—Yes, in the morning part.

Not in the night?—No.

Have you any recollection of his being there of a night?—No, not to go round the establishment.

Does he in any way interfere with the medical treatment of the patients?—He inquires, if he sees a patient out of health; he asks who attends him, or when he was attended, and I give him every particular, and he says perhaps there might be some alteration made in his diet, or in his medicine, but he is not a medical man, and is not so particular.

Does he ever give any directions as to the treatment of the pauper lunatics, as to their mental treatment?—Frequently.

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Can you say that his visits are of such a nature as to exercise any positive influence over the establishment?—Yes, I should think so.

Anything that happened he must be made acquainted with?—Yes; because he goes round very frequently when I am not there, and the convalescent patients will tell him.

You conceive he superintends the health of those patients as far as their recovery from their mental disorder is concerned?—Yes.

And efficient control in that respect?—Yes.

If he considers that your treatment is not efficient he gives directions to alter it?—Decidedly so.

Your absence is never over the night?—Never; I have slept out only two nights since I have had that place at Woodford, which is more than a year.

What was done in the course of the twenty-four hours you felt yourself able to control?—Yes; when I have given orders, then Mrs. Jennings was always there.

Anything that was done in the course of Sunday was done under your direction, as much as if you were there?—Yes, under my direction, certainly; and when I came home, I always found it was done; I felt satisfied that the patients were always taken care of the same as if I had been there; I have always had confidence in the servants.

You have been in this establishment nine years, then you must have seen the commissioners on their visitation?—Yes, always.

Do they ever remonstrate upon any thing going on in the house?—No.

As to the size of the house?—They have said it was crowded.

As to the cleanliness of the house or the treatment of the patients?—They never made any mention to me of anything, only that the house was too crowded.

Did they say that to you as being superintendent, or did you overhear their conversation?—I heard them conversing one with another; they have sometimes said the ground was too crowded.

They never complained of the keepers being insufficient?—No, they never made a complaint of that kind to me.

Were you keeper in 1817?—No, I believe not; I was there.

You are not at all aware of a complaint of the keepers being insufficient?—No; it was not likely a complaint would be made to us now.

How many keepers were there then?—I cannot say.

Cannot you say how many keepers there were then?—No. I attended to my own business.

You must remember how many keepers there were to assist you?—When I was a servant I was on the gentlemen's side; I was a very short time with the pauper patients; when I went there first, I went among the pauper patients, and then I was soon removed to the other side.

Were not you in the habit of living with the other keepers?—No; the servants have their meals in their own room, therefore it is not impossible that one servant may be in the house six months without another seeing him.

Do you think there were more or less than now?—I think rather less, speaking from memory.

Does the number of keepers vary much?—No, except a servant is discharged.

Do you ever remember any complaint being made of the insufficient quantity of clothing?—No.

Do you remember, in 1822, a complaint of the ventilation being insufficient?—Never.

From the commissioners?—No; if there had been a complaint made, I must have heard of it; I was then the same as now.

We have the records of the commissioners, and we find that such a complaint was made?—I never heard it; it was not made to me.

And very few of the chambers having chimnies, was that ever mentioned?—Yes, I think it was mentioned.

Has it been remedied?—Where there are chimnies they had been stopped up previous to that complaint; it has been common to put boards in the chimnies, but since that they have been taken out.

What is the custom as to persons who die in the house?—We have a room on purpose; we have a dead room, or shell room; we get them washed clean, and shaved, if they are men, and put them in the shell, and carry them there.

The patients have no opportunity of being in the same apartment with the dead bodies?—None whatever.

What

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What is the habit of the commissioners when they visit the house ; do they read to you those remarks they make ?—No ; they do not make remarks while with us.

You are not acquainted with them ?—No, unless they make it verbally.

You never received any thing in writing from them ?—Never.

Have there been any complaints of the rooms being too crowded ?—Yes, I have heard that complaint more than once.

Not made to you ?—No ; one of the commissioners might turn round to me and say “ You are too full here, you are crowded.”

Knowing that was the opinion of the commissioners, did you lessen the number ?—We sent them to another house ; Mr. Warburton has a house adjoining, called the Red House, which, though much better built, and better adapted to appearance, still it is not so full, therefore we have repeatedly sent them there.

When the commissioners came the next time, did you state you had done so ?—Most likely I did ; I do not recollect it.

Did they make any remark upon the state of the house then ?—No, I do not recollect that they have.

You have stated that you considered the visits of Mr. Warburton were of a nature to give him a general control over the whole ?—Yes.

You think nothing can materially go wrong in the establishment without it coming to the knowledge of Mr. Warburton ?—Certainly not.

You think that no abuse or mal-practice could exist to any degree without his knowledge ?—Certainly not.

How do you account for the circumstance of Mr. Warburton being entirely ignorant of it being your custom to confine the crib patients from Saturday evening to Monday morning ?—I cannot account for it ; and previously to hearing Mr. Warburton state that to the Board of St. James's Hanover Square, I considered he did know it ; but it has always been the practice since it has been an establishment, and I think it is the same at Saint Luke's Hospital.

You do not withdraw your former statement, that Mr. Warburton has a sufficient control over the establishment, when it is stated to you that that practice was not known to Mr. Warburton to have taken place ?—I should consider, that if any patients who were so confined had considered it a hardship or an abuse, I should think they would have made Mr. Warburton acquainted with it.

Then are you aware that the crib patients were so confined ?—A certain class of them was.

The crib patients ?—Yes ; not all ; not indiscriminately.

But a certain class of them were so confined ?—They were put to bed on Saturday night, got up on Sunday morning, washed and given their breakfast ; they were served with their dinner at the usual hour, which is either boiled beef or mutton ; at the usual hour in the evening they were got clean, and during the day they were cleaned if they dirted themselves two or three times ; their beds were put right again, and their supper given them, and put to bed at the same time.

You mean to state that this class of crib patients were taken from their cribs, washed and cleaned on the Sunday morning ?—I do distinctly state that.

And you mean that that practice is not only the practice now, but that it has been the practice up to and previous to last Christmas ?—Ever since I have been there ; indeed it is not the practice now to let them lie a-bed ; the parish of Saint George's objected to it ; we are always ready to redress any thing ; I would always give way to a body of gentlemen.

Why do you select Sunday as the only day in the week upon which they should be so confined ?—Because I was sure they should have a day of rest ; we were not visited by the committees or friends of the patients, and that they would not have any other day.

Then, according to your impression, it would be for the advantage of the crib patients to be confined every day in their cribs ?—No ; but if a patient is in a high state of disorder, and has exerted himself six days, I think one day out of seven he is better in bed ; but it is not confined to Sunday, many are in bed on other days.

You consider it beneficial to confine one class of patients every Sunday ?—I consider it beneficial to confine any patients if they are in a high state of disorder.

Then why did you give it up ?—I stated, however wrong it might appear, I would give way to a public body ; if ten people considered it right, I would give up my opinion to that ten.

You consider it a great advantage to confine them one day out of seven ?—Yes,

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And yet you give up that opinion?—Yes, if the College of Physicians or any respectable body suggested it.

It was quite accidental your selecting a Sunday?—It was always so; I did not select it.

Did you always find the confinement produce good?—It was not to the same patients; there may be ten confined this week, and ten next, and nine may be different.

You consider that confinement has a tendency to soothe them?—Yes.

It is not only the patients in the crib ward?—No, certainly not.

Do you confine your other patients on the same day?—Yes, if they are in the same state.

Do you do it?—We have very few private patients that want confinement.

Do you confine those other patients that are in a high state on Sunday too?—Yes, or any other day, if necessary.

Do you confine any other patients, except pauper patients, who are in a high state, from Saturday to Monday?—No, we do not; we have none that require it; I do not suppose we have above three patients under any kind of confinement.

It is only pauper patients?—They are double the number; they are of the lower order too, and consequently the state they are brought up in is to be seen even in a state of disorder.

How came you to adopt this system, had you learnt it from Mr. Warburton?—It was not adopted by me, it was the system in the house.

It was the old system?—Yes.

Do you know whether it is adopted in any other houses of Mr. Warburton?—I do not know.

You never asked the medical man whether it was fit?—No.

Was Mr. Dunston aware they were confined?—Not a doubt of it.

You understand it to be the practice of Saint Luke's?—Yes, I think I may state it is.

Mr. Dunston is the surgeon to Saint Luke's?—Yes.

Do you observe much difference in the liability to excitement between the poorer and richer classes?—Yes, generally speaking, the poorer classes are higher and more turbulent in their disposition.

Do you mean that no patients are confined in those crib-rooms all Sunday except the violent patients?—I really do, or the wet and dirty patients.

Have you not a class of patients called the wet patients, who are not violent, who are confined all Sunday?—Yes.

Then what reason can you give for confining the wet patients not violent in their disorder during the whole of Sunday?—I have stated they are the better for one day's rest out of seven.

You have said that as to the patients in a violent state, that does not apply to wet patients?—Yes, it does, or a patient in a paralytic state; it is not an uncommon thing for them to sit in their chairs and sleep all day when they do not sleep at night.

That person that is in that state of apathy would be equally composed if in a room, taken up from his crib, as if left in his crib?—I do not consider that; if a person is in a state of apathy, he would sleep more comfortable in a bed than in a chair.

In point of fact you are in the habit of applying this species of confinement exclusively to pauper patients?—Yes.

Yet you state it to be a treatment likely to contribute to their recovery?—Yes.

Then why do you not apply it to others?—We have seldom any that require it.

In the course of nine years is it not probable that one instance should have occurred of an individual who would have derived advantage from it?—Frequently; if they require it, they lie a-bed.

I understood you to say you did not remember ever having applied this species of confinement to any but pauper patients?—What I should say to that is, I do not recollect it, but if any were in that state, I should recommend it.

In point of fact, did it ever happen that any but the pauper patients were so confined?—Frequently.

Periodically?—If his disorder was periodical.

It is not a question of periodical disorder, but of periodical confinement; did you ever apply it to any but pauper patients?—Yes, I have, I think.

In your previous answer, you have said you did not?—If I said so, I did not mean it.

Will

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Will you take upon yourself to say you ever did confine from Saturday night to Sunday morning any but pauper patients?—Yes.

Regularly every Sunday?—Yes, not the same patient; if there was a patient in a high state of excitement this Sunday and well the next Sunday, he was not confined the next Sunday.

What is the whole number of patients?—About 430.

Out of that what is the number of paupers?—I think about 264 or 265.

A little more than half?—Yes.

I thought you stated the number of male paupers was under 100?—We have generally rather more females than males, but I do not recollect the number.

What was the number of persons you were in the habit of confining from Saturday to Monday?—We had never any specific number.

What was the greatest number?—As many as fifteen or twenty, through the house.

Out of about half the establishment?—Yes.

Of the other half, you have no recollection that any individual was confined periodically?—I cannot remember the name of any one.

Do you remember the practice applying to any number of individuals of the private patients?—Yes, I do.

That of periodically confining them?—Yes, that of confining them one day in the week, and that day was chiefly Sunday.

Was the day of confinement applied by you to the private patients, always the Sunday?—Yes, always the Sunday.

What number of private patients did you ever confine?—Never more than two or three or four.

As a matter of practice, can you take upon yourself to say, you have applied this species of peculiar confinement indiscriminately to richer and poorer patients?—Yes, if they were in a high exhausted state.

You have made no difference in the treatment of the pauper and other patients?—No, we never made any distinction in the treatment of the patients, though the price paid was different.

The question referred to this, whether there ever has existed in your establishment, that species of peculiar confinement, which the Committee understand applied exclusively to the pauper patients, not only from other testimony, but your own, and which, now seeing an impression is made by your answer, you seem desirous of contradicting?—If I gave an answer in that way, it was from not understanding the question.

It has been stated, you were in the habit of chaining down the crib patients in an evening, about an hour previous to dusk, in things called cribs, which are boxes containing straw, and leaving them there till the following morning, locked in, without any attendance being paid to them in the course of the night, let whatever would occur, is that a true description?—Never; that has never been done, or has it ever been, that I have not gone round among the male patients at ten o'clock at night, and seen every male patient.

That is not true?—No, there never was a more exaggerated statement.

After ten?—No; it is always my practice to clear the kitchen of the servants at ten o'clock, and then about a quarter or twenty minutes after, I go round the yard to see the lights out, and then I go into the crib patients, and men's apartments, and see that they are all covered up, and are comfortable.

Are they all chained down?—Many of them, most of them.

Are they all of them?—I do not know that you might not put a paralytic patient there, one not sensible to the calls of nature without.

It is further stated, on the Saturday evening those patients were locked down in the same state, and kept till Monday morning without being unchained, or allowed to get up to relieve themselves in any way whatever?—That is as false a statement as was ever made, the patients are always attended to in the way described.

Repeatedly visited and cleaned?—Yes.

The straw changed on the Sunday?—Yes, if dirty; and always changed twice a week, if clean; sometimes the patients do not dirty their straw; if it is in the least wet, it is changed every day, if wet.

That practice took place previous to last Christmas?—Always, ever since I have been there.

It has been further stated, on the Monday morning, like other mornings when they get up, there were many of them in a very filthy state, and have been seen in the depth of winter, when the snow has been upon the ground, put into a tub of

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cold water, and washed down with a mop, is that true?—I never heard a more exaggerated or barefaced falsehood in all my life.

In what respect is it true?—I think I could take an oath that I never saw a mop used three times to the patients since I have been there.

Independently of the mop, is it the practice, in the depth of winter, to take those patients and wash them in cold water?—Never; there is a copper close by the door, if any gentleman has been there, I dare say they have seen it, between the straw rooms; it is always heated in the winter time, it is heated so as to be warm before it is light; it is mixed with cold water, and flannel is taken into the room.

Is soap allowed in the establishment?—Always.

To the pauper patients?—It is given to the servants, and the servants give it to the patients.

How often are the towels changed?—Twice a week, and three times in general; but never less than twice, it is a jack towel.

How many persons use it?—If the patients have not a towel of their own, they use it, many of them have a piece of cloth of their own.

How many make use of it?—All in the ground that have not towels of their own.

When you confine your private patients to their beds, how are they confined; in what way?—If they are in the same state they are confined in the same way as the pauper patients.

Chained?—Yes, as often as wanted.

Does it often happen?—Not so frequent in proportion as among the other patients.

How often in the course of a week have you any private patients chained now to their beds?—I should think we have one or two; we have one very violent; I dare say he is now a-bed.

Never more?—Seldom more; we have seldom less.

Have you one or two private patients put in as pauper patients?—I do not think there is one pauper patient in bed now.

You confine not only violent pauper patients, but the wet and dirty ones?—They lay on straw the same as the others.

They are chained down?—No, not if it is a paralytic case.

Do you mean to say you do not confine in the cribs the wet and dirty pauper patients during Sunday?—We do not confine them in the crib.

Do you or not confine them during the Sunday to the cribs?—Violent patients we do; but a paralytic patient that does not need confinement, we do not confine them on Sunday or any other day.

You said confinement for the high or exhausted patients was beneficial?—Yes.

And if you saw a patient of that kind sleeping in his chair, you would think it better to put him in his bed?—Yes.

Would you chain him?—No, if we could be sure he would not get up.

Suppose he was not willing to go to bed?—A patient in that lost state is not capable of giving an opinion; he must be judged for.

A person may prefer dozing in his chair to going to bed?—I have never heard any opinion against it.

Are those wet patients confined on the Sunday able to get up to wash them?—If they were lifted up.

Are they able to get out of their cribs themselves?—No.

What prevents them?—They never attempt it; they are able if they choose it.

Are they chained?—Not the last; the wet patients, if we are satisfied they will not or cannot get out, they are not chained.

Is it only the violent patients that are confined during the Sunday or not?—No; there is a certain part, as I stated before, the paralytic or those wet and dirty, are confined as well as the violent.

The fact is, that previous to these investigations you have confined all the crib patients on the Sunday?—No, we did not; and if any patient was in a high violent state, if he was more tranquil of a Sunday morning and wished to get up, he was got up.

What are wet patients?—Patients insensible to the calls of nature.

Do you draw any distinction between the paralytic and wet patients?—Certainly; when a person is in a very paralytic state, he is lost to the calls of nature.

Are all wet patients paralytic patients?—Certainly not.

With regard to your private patients, do you confine anybody with the violent patients?—No, we do not indeed; we have not any one that requires confinement.

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Did you ever do it?—Yes.

Anybody but the violent?—Yes.

Has it not been the custom to appoint a convalescent patient to be what is called a crib-room man?—No, never; they frequently assist in the bed-rooms and in the crib-rooms; they had never any appointment.

There was never any such appointment as a crib-room man being a convalescent patient?—Never.

And it never was the custom in your establishment for this crib-room man to undress the crib-room patients, to place them in the straw, and chain them down, and the keepers to come round to see that they were safely deposited?—No, never; they frequently assisted the keepers.

You said there were a certain class of patients whose straw you only changed twice a week?—Yes.

What is that class?—The class of patients very high and violent, in a state of disorder that are not fit to lie on a bed without confinement, and still they lie clean.

Are they not constantly confined to their crib?—Yes, those kind of patients are.

Is the attendance upon them so constant, that they never dirty the straw in the mean time?—It is very seldom they do; I cannot say it does never occur.

Does not it constantly occur?—No; they are frequently confined only by one hand, and then they can reach the tub; there is a tub under every bed.

If they cannot reach it?—Then the servant attends to them; so that it happens very seldom a person wets his bed, though in that state.

Do you mean that there is any servant so constantly in attendance upon those patients, so as to be ready to help them?—I have stated, it may not be so always, but in general it is.

With five keepers, is it possible there should be any thing like constant attendance upon them?—Yes, because those patients in that state want a great deal more attention than the others; the others are capable of going to bed, and getting up and dressing themselves constantly; the attention of several of the servants is directed to those who cannot.

You positively asserted, that there were only certain of the crib-room patients confined to their cribs during the Sunday, that those were confined; upon an examination of their state on Sunday morning, and you can answer for their having been always taken from their cribs and washed upon the Sunday morning?—Yes.

You positively state you know it to be a fact?—Yes.

Did you not tell us, that you were absent every alternate Sunday from the establishment?—I did.

How can you then answer for that practice having been constantly carried into execution during your absence?—I believe I stated I never went out on a Sunday morning before nine or ten o'clock; consequently, have seen every thing of this sort put into practice. I take my children to church, and come home in the afternoon.

And this was done before nine?—Yes.

You are present when it is done?—Yes; not every one; I could not be in three rooms at a time. I saw it was done.

There was no fire in any of those rooms?—Not in any of the bed-rooms.

No flues?—Not in the crib rooms.

There was no glass to the windows?—Yes, there is glass to the windows chiefly.

There are crib rooms in this establishment, in the windows of which there is never any glass?—There is one, or there was one; there is glass now; then there were shutters to the window.

But in order to admit light, you must open the whole shutter?—No, not open the whole shutter, the shutter folded.

It was the constant practice to open that window in such a manner in the summer and winter, to let in the air?—When we want to get the patients up; in the winter time they are put to bed, and got up by candle light; then it was shut.

It was open during the light of the day?—Yes.

What was the covering of those patients at night?—Two blankets, and what we call a rug or coverlet.

Each crib patient?—Yes.

They had that previous to Christmas last?—Yes, and always since I have been there, what is called a Scotch blanket; a large one is thrown over the straw, and the patient laid on it, and then the other half is laid over him; then, on the top of that is put a small blanket; then over that is put a rug, and that is tucked in on each side.

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Were not many of those patients who are necessarily confined during the day in the crib-rooms, confined with nothing more upon their persons than those two blankets?—Yes, that is frequently the case.

No clothes whatever?—No body clothes when they are in bed; we never do.

During the whole day, in the winter and summer, this window was open without any glass?—No; if the room was too hot any particular time, it was opened, if not, we shut it.

Do you mean you shut them up in total darkness?—Yes, if it was a dark day.

All day?—Yes.

Do you consider there being shut up in darkness was advantageous to them?—Advantageous, I considered it.

How often were those blankets changed?—We have always two sets for the wet patients; if a patient wets his blanket to night, in the morning, when the bed is made up, we have two blankets more to put on the crib; and those two blankets wet last night would be put in the drying room till they were dry, and then they were put in the closet, and made use of the following day, so that the patient does not have those blankets till the night following.

How often are they washed?—They are washed every day, if they are dirty; then we have a drying room that will dry a thick blanket through in three or four hours.

Will you tell me when Mr. Warburton first became acquainted with this practice of patients being confined on the Sunday?—Till I heard Mr. Warburton speak about it at St. George's in February, I thought he knew it.

How do you account for his not knowing it?—I cannot say.

Did he express any opinion of its propriety or impropriety?—No.

Has he ever since that expressed any opinion upon that point?—No.

Did he ever reprehend that practice?—It has been discontinued.

Did he ever express his astonishment that it existed?—He said he did not know of it.

Did he express his opinion that it was a proper practice?—He stated it was not.

Had you any conversation with him at any length upon the subject?—No.

Was it in consequence of his expression of opinion it was improper, it was discontinued?—No; it was in consequence of the expression of the wish of the Board; Mr. Warburton concurred in it, and it was immediately adopted.

Then in compliance with the wish of the Board of Governors of St. George's, you have discontinued the practice as to all the pauper patients which you thought advisable?—Yes.

Out of deference to one body of gentlemen totally unacquainted with the treatment of mental insanity, you have discontinued the practice as to all the other patients?—Yes.

Has that practice been discontinued as to private patients?—Yes, certainly.

Are you always so complying as to the regulations, that if any person objects to a regulation, you always cease to enforce that regulation as to those patients with respect to whom he has a particular interest, and extend it to all the others?—Yes, certainly we do; it must become a general rule of the establishment or we cannot carry it on; for instance, as to the confinement; we used to confine them in strait waistcoats till Lord Robert Seymour came to our house; he was constantly about it; we have discontinued it in consequence of his objection; I have heard him say, if he thought the use entirely of the strait waistcoat was not abolished before he died, he thought he could not rest in his grave.

And for the sake of his resting in his grave you have done away with it?—He was a man of some consequence.

Do you ever consult a medical man upon the propriety of changing this treatment?—No.

If Mr. Warburton had expressed any opinion upon the subject, would you have changed it in deference to the opinion of the persons, the directors of the poor?—Yes.

Without any reference to a medical man?—Yes; I should have taken it upon myself; I should have mentioned it to Mr. Warburton, and if he did not object to it, I should adopt it.

Did Mr. Warburton object to it as being improper, or as rendering the establishment unpopular, and detrimental to his pecuniary advantage?—He did not state to me his grounds for the objection; he said he did not know of it, and that it should be discontinued.

He

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He did not say it applied to one particular parish more than another?—As I have stated before, if any alteration is made it is general.

Has Mr. Warburton, since the discovery of your practice of confining these patients on a Sunday, expressed his dissatisfaction in strong terms to you for your conduct?—No, he has not; not in strong terms, only what I have stated; that he did not know of it, and that it should be discontinued.

Have you any reason to believe that since the discovery you have lost any part of that confidence you formerly possessed?—I have no reason to think so.

Have you any notion that Mr. Warburton has had it in contemplation to dismiss you from the establishment in consequence of that?—I cannot say what his thoughts are, but I was so hurt in consequence of the false representations made, I thought of going myself.

What were the representations?—About the patients being washed with mops and birch brooms, I saw in one of the newspapers; such things must be revolting to human nature; it was not very pleasant to me to go to St. George's parish, or any other place, when such reports were afloat.

Some time in the month of February last, Lord Robert Seymour and two other gentlemen belonging to the parish of Mary-le-bone visited your establishment?—Lord Robert Seymour has visited it very frequently.

It was on the 26th of February?—Yes, I recollect that very well; it was between eight and nine o'clock.

Will you state it was past eight o'clock?—A quarter past eight; I saw in a letter I received it was twenty minutes to eight; that might arise from a difference in the clocks, but I believe ours to be right.

Did they demand admission to see the pauper patients of the parish of St. Mary-le-bone?—Lord Robert Seymour said, "I have come to see our patients;" I said, "not to night, my Lord, certainly;" He said, "cannot we see them;" I said, "not to night, certainly, my Lord;" I repeated it again.

Did you give any reason for his not seeing them?—I said it was past the usual hour of visiting; and also I said it would be highly improper to take gentlemen through the females apartments, where the females were going to bed, or in bed.

Did you not mention that it was past the hour mentioned by the Act of Parliament?—Very likely I did; but the impression upon my mind is, I did not mention the Act.

The chief ground you advanced was with regard to the females?—Yes.

How far is that applicable to the males?—After that, Lord Robert said, "cannot we see the males?" I said "no, not to night;" it was an hour and a half in the night, in the month of February.

What objection did you advance beyond that?—That it was not the usual practice, and I stated to Lord Robert Seymour and the gentlemen, "you will please to understand, my Lord, I take this refusal entirely upon myself." A request of that kind I never had made before, and I took the responsibility of it upon myself.

Did they, or did they not, see any of the pauper patients that night?—Not one.

You would not let them visit them?—I did not.

You refused them?—Yes.

Did you conceive that all the business of the house was finished that night; was the house shut up or only the rooms of the patients?—Our servants were not gone to bed, nor were the private patients; they seldom go to bed till nine o'clock.

Were any tradesmen about?—No.

There was a coffin being carried in at that moment?—Yes.

Did not that disturb the patients?—No; for you go through the kitchen, and the shell room has no connection with any other rooms; no patients can see it.

Do you mean to say that visiting patients after they are once in bed is injurious to their health?—Yes, particularly by strangers; for instance, upon my going among the men, they do not pay any attention to me; I go in very quietly to see that they are all covered up, and then I lock the room and come out.

Do you think that observation is applicable to all the patients?—Yes.

Do you think that so essential as to make it a proper ground for your refusal?—That was not the ground.

What other was there?—I said it was irregular, and past the visiting hours.

You meant those alluded to in the Act?—No, I did not; the hours prescribed by the Act are from eight or nine till five; we admit the friends of the patients to see them from nine till four in the winter, and from nine to six in the summer.

You spoke with reference to that?—Yes, as being the general practice of the house;

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house; Lord Robert did not state any reason; if he had stated any reason, he should have seen them; but he came and demanded admission as if he had come at twelve o'clock in the day; as he came at that unseasonable hour, I thought proper to refuse him.

You are of opinion that visiting after this hour was injurious?—Yes; but that should not have prevented me allowing them to go round if they had stated they had any object in view.

Do you not admit visitors now after those hours in consequence of what then passed?—We have stated since we should not object; and had we known their object, we should not have objected then.

You do permit the officers of St. George's, Hanover Square, to visit after those hours?—Yes, we do.

Does that extend to the other parishes?—No; they have not made the request.

Would you have refused if they had?—No.

You would have given up your judgment then in deference to private opinion?—Yes.

You afterwards refused the parish of Mary-le-bone when you saw the Board?—I was never before that Board, and cannot say what passed.

Will you tell us what Mr. Warburton communicated to you upon the subject of this visit; did he approve or disapprove of it?—He did not say the one or the other.

He approved of the alteration?—Yes, I believe he did; then there was a request made when Mr. Warburton was before the Committee, that they should visit them at any time they liked.

Have you found any evil result from the visiting of the patients late in the evening by the medical attendant of the parish of St. George's?—He has never visited them after dark.

Some short time after this visit of Lord Robert's, do you recollect the arrival of Mr. Roberts and some other gentlemen from the parish of St. George's?—I recollect a Mr. Roberts and another gentleman rather pock-marked coming one afternoon in a coach, about five o'clock; they said, "We have come from our Board on purpose to see your infirmaries;" I said, "Very well, I will show them in a moment." I went straight with the two gentlemen to the women's infirmary; they looked at it, and I took them from there to the men's infirmary straight. When they had seen the men's infirmary, they state that they asked me, "Have we seen all the house?" The question they put to me was, "Have we seen all the beds in both infirmaries?"

Will you take upon yourself to say that you recollect they only asked to see the infirmaries?—That was the impression upon my mind; it was then, and is now: they put that question to me at St. George's; they said they asked me whether they had seen all the house. I suppose it must be so; but my impression was, that they asked whether they had seen all the infirmaries.

When they first came, your impression is, that they asked to see the infirmaries?—Yes.

When they had seen the infirmaries, the only question they put was, whether they had seen the whole of the infirmaries?—Yes, as I understood them.

Do you assert that you have no recollection whatever of their having applied to see any other parts of the establishment?—Certainly not; I have no recollection of the kind; if they had, they should never have been refused.

Do you recollect, the next day, or immediately after that visit, Mr. Roberts and those people coming again to see the establishment?—A day or two afterwards several gentlemen came; I was not in the way, and three or four patients came with them.

And you do not know that of your own knowledge?—No, I was gone into the city on particular business; I was not away above an hour and a half, but they had been during that time.

Your wife was at home?—Mrs. Jennings was at home.

Do you know whether they were admitted?—They went straight forward; they never stopped anywhere.

When you returned, were you told they had been, and that they had seen the whole of the establishment?—Yes; Mrs. Jennings told me that they had, and that they had brought patients with them; and Mrs. Jennings as well as myself were surprised at it, for if they had applied they need not have brought any patients with them.

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Did she say anything of the astonishment they expressed at being admitted to five rooms, of the existence of which they had never known before?—Yes.

Were deputations from those parishes in the habit of visiting your establishment? Always.

When they came, was it your practice to show them the whole of the establishment?—They did not see those rooms.

You did not take them into those rooms?—I do not know that I have never; not latterly.

What was your reason for excepting those rooms?—No particular reason; one reason was, that they were not adjoining the other bed rooms, and they never expressed any desire, or anxiety, or curiosity; and I conceived they were not rooms to be made a public spectacle of, although necessary. I did not think it was pleasant to any gentleman to see a place like that, though necessary to put the patients in.

Do you conceive, that in an establishment of that sort, it can be proper that any part of it should be exempted from the inspection of the proper authorities?—If it was improper; I had no other motive than I have stated.

There were some crib-rooms into which you took those visitors?—I am not aware that there are any I showed them; and another thing was, there was one of the crib-rooms they said they had never seen; the windows opened into the yard, the same as the windows of this room do.

Have you more than five crib-rooms in the establishment?—Yes, I believe we have.

You know very well it was upon the subject of the five crib-rooms, in particular, those persons expressed their astonishment?—Yes.

Why was it you excepted those particular rooms from the inspection of this deputation?—I have stated why; I can only repeat the same answer.

Why did you make a distinction between those five rooms and the others; your reason is, that they were disgusting and not fit for public inspection?—It was nothing of the kind, those rooms were well attended to.

You said that it was shocking to humanity and not fit for public inspection?—Certainly; I did not think it was proper to make a public spectacle of rooms which, though necessary, no gentleman of feeling would like to see; the rooms were as comfortable as the state of the patients would admit of.

You made no scruple of admitting those gentlemen to the other crib-rooms?—I have no recollection of their seeing any other crib-rooms.

Was it your intention always to except the crib-rooms from inspection?—Yes, except from the College of Physicians or Lord Robert Seymour; he has been there many times, in every room in the house; he has been there, I can say, twenty times, and I have asked his lordship to take his glove off and feel that the cribs were dry and clean.

Was that in these very rooms?—Yes, there is not any room in the house he has not seen.

You were aware that these gentlemen were coming from a public body?—I do not mean to contend that it was right; I only state my reasons, and that it was not done from any improper motive.

Did you ever refuse to show these crib-rooms to any one that requested it?—No; one of the crib rooms is at the top of the hall, the hall is whitewashed, and the door of that room is painted black, it was as conspicuous as possible.

Were there any patients belonging to this particular parish in any of those crib-rooms?—Mrs. Jennings said there were two females in bed, but whether they belonged to the parish of St. George's or not, I cannot say.

Were you at home in August last, when Mr. Hall and a reverend gentleman from the parish of Mary-le-bone visited your establishment?—No, I think not; I think I came home before they left.

Were you present when they went up into the infirmary on that day?—No.

Do you remember the day of the month, so as to answer to the state of the infirmary?—I understood it was Colonel Clitheroe that went and found fault with one of the cribs.

The statement made to this Committee was, that upon those individuals visiting the infirmary, it was so offensive as to be very difficult to stay in it; this is the statement of Mr. Hall as to his visit on the 26th of August: "I gained access with Mr. Birdwood into this infirmary, there we found a considerable number of very disgusting objects, a description of pauper lunatics, which I should conceive to be chiefly idiots,

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in a very small room; they were sitting on benches round the room, and several of them were chained to the wall; the air of the room was highly oppressive and offensive, insomuch that I could not draw my breath; I was obliged to hold my breath while I staid to take a very short survey of the room." Can you state, upon your own knowledge, what was the real fact as to the state of the room on that day?—We have a small room in our infirmary over the warming room, and it is kept for paralytic patients, or patients not able to stir, because it is warm in the winter.

This was in August; can you contradict the statement here made?—I cannot think the room was in the state described.

You do not speak from any particular recollection?—I was not there at the time; I do not think the room was ever in that state.

Do you visit that room?—Every day.

Did you ever know any stranger visit that room?—Frequently; the staircase comes into one of our sitting rooms, and the door is chiefly open.

You were absent at this time?—Yes, I think I came home before they left; I think they were at the gate when I came home.

Nothing passed between you?—No; I bowed, and they passed on.

Did you visit that room that evening?—Yes.

Did you find it in a proper state?—Yes.

In as good a state as it usually is?—Yes.

Was that room whitewashed in the course of six weeks afterwards?—The whole house is whitewashed once a year, and this room where the paralytics are, they dirty the walls by spitting and so on, and that is whitewashed three or four times a year; but we did not do it in consequence of any report.

You say positively, in consequence of that visit, no alteration was made?—No, none; nothing more than would have been done.

Was there any whitewashing the next morning?—I do not recollect when it was done, it was soon after.

But that whitewashing and that cleaning was in no degree occasioned by the visit of those gentlemen?—In no degree whatever; I can state that upon oath.

There was no alteration on account of the visit of Colonel Clitheroe?—None.

What is the size of this room where these cribs are placed?—I have not got the dimensions.

How far are the cribs from each other?—There was one thing stated very incorrect, that there was one room containing fifteen or sixteen cribs, only eighteen feet long.

Was that room as large as the room in which we now are?—It is longer, but not so high; it is twenty-nine feet three inches long, by sixteen feet two inches and a half wide, and ten feet high.

That contained sixteen cribs?—Fifteen then; it contains thirteen now; the cribs were very nearly a yard wide, and they could not be put in the space mentioned.

A double row of cribs?—Yes.

As close as they can be placed?—No; they are full half a yard apart, more than a foot.

What is the custom in your establishment, with regard to the letters written by any of the patients confined in it?—They are always sent, if they are proper to be sent, according to their destination.

Who is the judge of that propriety?—I judge of that myself.

You open every letter belonging to every patient, that he may be inclined to send?—Yes; it is the rule to send them unsealed, but if any patient says, I want to write a letter to my brother, or wife or husband, and to seal it, I say, do so; but the rule is, that they shall be sent open; if they have any private communication to make to any near friend or relative, I do not wish to see it.

Do you inspect all letters that come to the establishment for patients?—Not at all; they are delivered to them unopened.

Do you remember Mr. Solomons writing any letters to his friends during the time he was in your establishment?—Yes, two or three; I know he wrote one or two to a brother.

What became of those letters?—I sent them.

You positively assert they were put into the post?—I do.

What is your object in inspecting the letters?—Sometimes they are for very irrational purposes, and full of nonsense.

Do you withhold them?—Yes, I do.

You intercept them?—Yes, if they are nonsensical letters, and sometimes they are

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are very disgusting; patients in a very high state of disorder sometimes write very disgusting letters.

The commissioners report, on the 30th of December 1822, that the three houses in the care of Mr. Jennings, are too much crowded; did they report that to you?—It is very likely they did; I believe they did make that report; and in consequence of that report, there were twenty or thirty patients removed to the next door.

On the first of July 1823, the commissioners again report, that these houses were too much crowded; did they say any thing to you upon that subject?—I do not recollect that they did; it is most likely they did.

Was any thing done in consequence?—Patients were sent next door four different times.

Was there not a certain number, that the commissioners mentioned as being such as they approved of; were patients sent away each time that they complained?—Yes.

And fresh patients must have been brought in, to cause a repetition of the complaint?—Fresh patients were admitted.

Why does it appear that the three houses throughout under your care —?—I must beg pardon, I have only one house; Mr. Warburton has only three houses altogether.

This addition of fresh patients, which again caused the complaint of the commissioners, was it by order of Mr. Warburton, or did you admit them under your discretion?—I admit them under my discretion.

You enter into the contracts with the parishes for their pauper patients?—Yes.

Are any of those contracts reduced into writing?—No.

Then how is it understood between you and the parishes what articles you are to provide for the patients, and what you are to make an extra charge for?—The sum stated is to include every thing except clothing.

You make no extra charge for medicines?—To the parish of Mary-le-bone we did, but not the others.

Did you charge them less per head in consequence of not supplying medicines?—No, we did not.

Whatever agreement is entered into is entirely verbal?—Yes.

And made with you?—Yes, chiefly; but those parishes have been with Mr. Warburton before I came there, so that the agreement was made when they originally came, and they raise or lower the patients according to the true price.

Do you receive the money generally?—Yes; I generally receive all money, and pay and settle the whole accounts with most of them, I may say altogether; I do not suppose Mr. Warburton has received 100*l.* since I have been with him.

With regard to the admission of the patients, how are they treated in the first instance?—That depends upon the appearance of the patients; if they are very high and violent, we are obliged to confine them; if they are tractable or quiet, they are allowed to walk about, or put to bed.

Is that at all times left to your discretion, or is it under the direction of Mr. Warburton?—It is left to my discretion, but if there is any alteration to suggest, he suggests it.

Does he pay particular attention to those who have been brought in lately?—Yes; Doctor Warburton, particularly.

Does Mr. Dunston do so too?—Yes; they are shown to Mr. Dunston the first time he comes; if they are in an ill state of health or violent when they come in, Mr. Dunston or Mr. Cordell are sent for, if they are not in a violent state, they are left till they come again.

Then the Committee are to understand, that Doctor Warburton or Mr. Warburton, or Mr. Dunston, or Mr. Cordell, give directions as to the future treatment of the patients?—Yes.

Do those directions extend to medicine or diet?—They go to both.

Then in point of fact, there is some selection of diet, when patients are first brought in?—Yes, if it is required from their bodily health.

Do you look at the certificates sent in with the patients?—Yes.

Does Mr. Dunston sign your certificates?—Yes.

And Mr. Cordell?—Yes.

Does Doctor Warburton ever sign them?—No, never.

Doctor John Warburton, called in; and Examined.

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THE Committee understand that you are anxious, in consequence of the indisposition of your father, to be examined before the Committee as to such points within your knowledge as may be material to your father's establishment?—Such is the case.

Will you state those points?—More especially as to the part I have taken for the last nine or ten years in assisting my father in the general superintendence of the houses at Bethnal Green.

Will you state what part you have taken when you have assisted your father, and what portion of your time you have given to that purpose?—The general mode in which I have visited those houses has been when my father has been in London, in conjunction with him, in going twice a week regularly to the houses upon the Tuesday and Friday; if my father has at any time been absent from London, I have made a point of visiting these houses for him, and whenever I have been out of town, he has remained in London for the purpose of visiting them in my absence.

The Committee are to understand that on the Tuesday and Friday these houses are visited either by you or by your father?—Yes, generally, with very few exceptions; I cannot say there may not have been a Tuesday or Friday when circumstances may have prevented it, but it is the general practice that one or the other of us should visit those houses on those days.

With the exception of those Tuesday and Friday visits, you have given no other portion of your time to the care and superintendence of the patients in those establishments?—Not generally, certainly; I have at other times visited them, but not considered it a point; they have not been my visiting days.

How long do those visits of yours generally last?—Generally from an hour to an hour and a half.

Do you consider that a visit of an hour and a half twice a week would enable you to form any opinion as to the general state of the patients in these establishments?—As far as the superintendence I have taken of them goes, I have considered that as sufficient; I have not taken upon myself the medical direction of these houses, nor have I considered myself as the physician to those establishments, confining my attention wholly and solely as the physician to Whitmore House, which belongs to my father, and to private patients who may be in private lodgings.

What do you mean by superintendence, as you have not given your care to the recovery of these patients, either as to bodily or mental diseases?—I have gone round the house, and seen most, if not all, the rooms in the house, certainly all the sitting rooms; I have looked at the patients as I passed, and if any patient has struck me as requiring particular attention, I have paid that attention to him immediately myself, if the medical man was not coming that day; if he was coming, I have desired the superintendent, Mr. Jennings, to point out such patient to the medical gentleman when he arrived.

The Committee are to understand that no curative process with regard to mental recovery has ever been carried on in that house under your direction?—In some cases it has; I consider there is a curative process carried on; I have pointed out patients, and desired it might be mentioned to the medical man that I wished such and such treatment to be followed.

But, generally speaking, it falls under the direction of the other medical man?—Yes.

Have you, when you have been occasionally attending this establishment, ever thought it your duty to direct that any pauper patient should be removed from the common diet to the sick diet?—Yes, I have.

Are you aware that any sick pauper patient has been so accommodated with that sick diet?—I have no doubt that has been done, I have ordered it.

Did you ever, upon your inspection of the house, visit the male infirmary, or rather the male infirmaries?—Yes, I have, certainly.

Are you aware that any one of those infirmaries was in a state so offensive as to render it impossible for an individual to remain in it without considerable personal inconvenience?—I myself, upon my visits, have never found it so.

Did you visit it in August last?—I cannot say as to the month or day I visited that infirmary; the patients in the infirmary I have always considered as being constantly under the charge of Mr. Dunston, the medical gentleman who attended; and therefore, unless upon asking Mr. Jennings, he has told me there was any case that required my immediate attention, I have not gone into these infirmaries constantly.

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The Committee understood you to state that you thought your duty of supervision was to see that the rooms were in a proper state?—Yes, the rooms generally.

Do you conceive the infirmary is an unimportant room to be in a cleanly state?—Whenever I have seen it, which has been several times, it has been in a cleanly state.

Do you mean that the infirmary is so entirely under Mr. Dunston that you do not consider it so important for you to visit it?—I consider it more immediately under Mr. Dunston's inspection, and his visits are more frequent than mine.

It has been stated before the Committee, that two gentlemen went into the infirmary, which was found in so disgusting a state as to render it impossible for them to draw their breath, that they found pauper patients chained to the wall, and that the filth was such as to be most disgusting?—I have never seen it in that state; the principal mode of restraint I have noticed in that infirmary, which generally speaking, as far as my observation has gone, has been occupied by paralytic patients, is this, there is a small arm that goes between each patient, a kind of arm-chair, and the general restraint has been either a leather strap, or a chain passed through holes in the different arms, so as to prevent the paralytic patients falling forward out of the chair. I am certain upon my visits I never saw a patient chained to the wall; that is the only restraint I have seen.

Are you aware of this visit of Mr. Hall and Mr. Birdwood having taken place in August last?—I really am not aware of the names, but I heard of it sometime afterwards, in August; I was absent from town some short time, with my wife, during August and part of September, and therefore I cannot really precisely say I am aware of these gentlemen having been there; it was some time after my return, which was towards the 29th or 30th of September, I heard of it.

Was it your custom, whenever you visited the establishment, to inspect all the rooms in the establishment?—All the day rooms, with the exception, I beg to say, of the infirmaries.

Therefore, in point of fact, it might have happened that those infirmaries have not been inspected by you for a very considerable time?—It might have happened that they have not been inspected by me above four or five times a year.

Did you think the crib-rooms part of what you considered it your duty to attend to?—I have frequently been in them, but I never made a practice of going there upon any particular day.

It is not your practice regularly to visit them?—No, nor the sleeping rooms.

Nor any other part except the day-rooms?—The day-rooms.

That was your regular visit?—Yes.

It was not your regular practice to visit the other parts?—No; I had a reason for it; every time I have been over the house I have found it very far from dirty, on the contrary, clean; and I was unwilling that any particular day should be known for my visiting the crib-rooms or the sleeping rooms; and I have very frequently gone there without giving the superintendent any notice; when I have visited the patients I have said, "now, Jennings, I will go into the sleeping rooms," or "the crib-rooms," without giving any specific notice to him.

Were you aware of the practice in this establishment, previous to these investigations taking place, of confining these crib patients from the evening on Saturday till the Monday morning, without removing them from their bed?—The violent patients, and many paralytic and epileptic patients, I have been aware of their being confined from Saturday to Monday.

Because you should know, that your father has stated before this Committee, as he previously stated before the Board of Governors of Mary-le-bone, that if such a practice had taken place in the establishment, it was without his knowledge?—I beg to state, from my own knowledge of my father's reason for that statement, that he understood that all the pauper patients indiscriminately had been confined, and if that was the case, he certainly disapproved of it, and so should I, most decidedly.

The statement made is, that the crib patients, by which we understood those who sleep upon straw, those who are either violent, or those who are insensible to the calls of nature, that they were confined from Saturday night to Monday morning, are you aware of that practice?—I was aware of the violent patients, the paralytic and epileptic patients.

The wet patients?—I do not mean wet patients, I mean persons labouring under fits, either paralysis or epilepsy.

You were not aware of the wet patients?—Not of its being a general rule for the wet patients; for those who are constantly insensible to the calls of nature, I have been aware they were so confined; most of those are subject to fits.

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Will you state to the Committee whether that was done with your approbation?—I certainly do approve of it; I have no hesitation in saying, in my own private practice I have been obliged to keep patients in a violent state frequently for one day, and oftener more than one day, in bed.

These were not violent patients but crib patients?—All paralytic patients or epileptic patients; I should say it was beneficial to them to be kept in bed a day.

Will you state whether you see any particular reason for those particular patients being kept in bed on the Sunday, or whether your principle would extend to any day?—No; my principle reason for selecting Sunday, in a large establishment, has arisen from the rule of the house, that not any visitors are suffered to come to the house to see their friends on the Sunday, and until of late, as far as my own knowledge serves me, not any of the parish officers have visited the house on a Sunday; I therefore conceive that where a patient has been violent during a portion of the week, it is requisite he should be kept tranquil one day, and that Sunday is the best day on account of being a non-visiting day, for that purpose.

Are you not aware there were many persons so confined in this house on the Sunday who were not violent patients nor paralytic?—No, I am not.

Then if any persons were so confined who were not either paralytic or violent, you would consider that improper?—Yes, unless they were constantly insensible to the calls of nature, then I should say it is not, and I have no doubt that is the case in Saint Luke's Hospital.

What is your system with regard to private patients; was the same course, in point of fact, followed as to them?—It was not followed as to the specific day, but it is followed in practice.

It is not regular and periodical as it is with the paupers?—No; because the visitations as to the private patients are not so constant; and if the patient is in a state not fit to be seen, the friends have generally taken that as our opinion, and have not seen them.

Were they not so confined during the Sunday as to set their attendants at liberty?—Upon my word I believe not.

You distinctly state that the attendants on those persons who were confined during the Sunday did not have that as a holiday or day of recreation by the confinement of those crib patients?—I most fully believe they had not; I believe it was more trouble to the keepers to attend the patients in the cribs than when they were up.

Does it require the same number of keepers to attend on a certain number of persons chained to their cribs that it would if they were at liberty?—I should think it would require more time for a certain number to be devoted by a certain number of keepers.

Were there as many persons in attendance during the Sunday on those persons chained to their cribs as there were in attendance on them when at liberty?—I believe there were the same number of persons in attendance upon all the pauper patients on those days; I do not believe that was a day on which the attendants were allowed to go out.

Have you ever been there on Sunday?—Yes, I have occasionally been there, but not very often.

Did you ever go on a Sunday into those crib rooms and see those patients so confined?—No, I never saw them on Sunday, I have on other days.

You of course never were present on Monday morning when those patients were taken up, and therefore know not the course of cleaning?—No.

The whole of the statement you make as to the treatment of these patients depends upon the belief you have in the assertion of Mr. Jennings?—Yes.

You know little of your own knowledge upon the subject?—Not of the patients upon a Sunday.

You know little of your own knowledge as to the establishment, except what you learn from the keepers?—No, I do not say that, because I see it twice a week.

You know nothing of your own knowledge as to the establishment except what you may have collected during your visits?—No.

Did you ever receive any complaint from Mr. Dunston of the state of the infirmary?—No.

Was he in the habit of reporting upon the state of the infirmary?—He has reported the state of the patients, but I never heard any complaint of the state of the infirmary.

Jovis, 21 die Junii, 1827.

ROBERT GORDON, ESQUIRE,
IN THE CHAIR.

Mr. *John Dunston*, called in ; and Examined.

YOU are the attendant apothecary and surgeon of Mr. Warburton's establishment?—I am.

How long have you had the medical superintendence of Mr. Warburton's establishment?—The last twenty-five years.

What other establishment of a similar description do you medically attend?—I am surgeon to St. Luke's hospital.

Do you attend any other establishment except St. Luke's hospital and Mr. Warburton's?—Not in general ; I occasionally go to visit patients at other establishments.

What other establishments?—I have occasionally seen patients at Burrough's at Hoxton, and Sir Jonathan Miles's, but I do not consider there is any responsibility attaching to me beyond the individual patients that I see at those places.

Do you practise generally as a surgeon, independently of those avocations you have described?—I do.

Where do you reside?—In Old Broad-street, in the city.

How often do you attend at St. Luke's?—I attend the weekly committees there, and I attend all surgical cases that I may be required to attend.

How often do you attend Mr. Warburton's establishment at Bethnal Green?—Every other day ; or if any thing prevents myself attending, a professional friend attends for me, or a competent assistant ; but most generally myself, sometimes every day, sometimes twice a day.

How many hours do you give up to the medical superintendence of the patients in Mr. Warburton's establishment upon your visits every other day?—It depends upon the number and the urgency of the cases ; I may have to see, it may be, from one to four ; I should say the average, taking the year round, may be three hours a day.

Do you consider it a part of your duty to see and examine professionally into the health of every patient in Mr. Warburton's establishment whenever you shall so visit it?—I go round the establishment and make my own observations ; if any case particularly requires my attendance, if I do not see it it is pointed out by the attendant.

Then in point of fact, you depend upon the representations of Mr. Jennings, or some of the servants of the establishment, in order to point out to you such persons as may require your medical attendance?—Not entirely ; I see with my own eyes as far as I am able, and if I do not happen to see a case, it is pointed out to me.

Do you make that answer with regard to the bodily ailments, or to the mental ailments?—To both.

Do you consider that you are responsible for any curative process that may be going forward in that establishment with regard to the minds of the patients?—Most certainly.

Do you consider that the pauper patients of that establishment are passing under any curative process for their minds under your direction?—Unquestionably.

Will you have the goodness to state to the Committee what steps, with regard to the pauper patients of that establishment, you follow with reference to the curative process of their mental maladies?—I fear I should not make myself understood if I were to speak professionally ; but I use all such means for their recovery as I do for the patients that are private.

The question does not refer to the bodily ailment, but the question refers to the mental ailment?—I speak of both ; I consider myself responsible for both.

With regard to the mental disorders of the patients, what steps are you in the habit of pursuing?—Such steps as the individual cases appear to call for.

Will you state what steps you take?—I do not know how exactly to answer the question ; if the case is one of high excitement the steps are to reduce that excitement, if it be one of depression, the steps naturally to be taken are to remove such depression, if it be dependent upon any bodily disease, to direct the attention particularly to that bodily disease which superinduces the infirmity of mind.

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Then you expressly declare that you do turn your attention to the cure of the mind as well as the body of the lunatic pauper patients?—Yes.

Do you not consider that variety of diet is of considerable importance in the care and management of such patients?—There are some cases that require peculiarity of diet, in which case it is directed and attended to.

Are you in the habit of directing pauper patients to be placed upon an improved diet in that establishment?—Very frequently.

Will you state the name of any one individual whom you have so directed to be placed upon a sick diet within the last fortnight?—I have a wife who is unfortunately dying, and I believe for the last six weeks I have not been in attendance there; my friend, Mr. Cordell has been in attendance for me; I came up to London for the purpose of attending this Committee yesterday; but the cases are very numerous in which I have so done.

Is Mr. Cordell a partner of yours?—No.

Is it your custom to superintend the care of a patient for a certain portion of time, and then to leave the further care of that patient to the care of Mr. Cordell?—Under the circumstances I have mentioned I have so done, it is not my custom.

Do you keep any register of the nature of the cases under your care and of the medicines by you administered?—No.

Then how is it possible for Mr. Cordell who assists you in the superintendence of that house, if he shall come to take up the further cure of a case which has been commenced by you, to be able satisfactory so to do?—From a previous communication with him upon the subject of that case in which I detail to him the history of the case and the treatment which has been adopted.

Then are the Committee to understand that you know by heart the cases of all those 500 patients that are placed under your care?—I have never 500 patients under my medical treatment at one time, the house does not contain above 450; and perhaps out of that number one in ten may be under my care.

Then under whose care are the rest placed?—I mean to say there are not more than one in ten either mentally or bodily requiring attention; the others are confirmed cases of derangement in which nothing more can be done medically than paying attention to the bowels.

You must be aware that at one period there were upwards of 570 persons in that establishment?—In the two houses there might be.

You have already stated that you consider those persons as under your medical care, not only with regard to their bodily but to their mental ailments, and you have also stated that you are in the habit of visiting those patients and of occasionally refraining from those visits and allowing Mr. Cordell to continue the further progress of the cure; the Committee therefore repeat the question, how it is possible for Mr. Cordell to know what steps have been previously taken by you unless any register of the cases of those patients and of the medicines administered is preserved?—In explanation of that I would say this; that I take with me what I call a list of such patients as are under my care, together with the remedies that are given to them, but I do not keep such document; as the paper is worn out, I repeat it, the paper that is previously used I throw away, and this list I read to Mr. Cordell and communicate to him the particulars of such cases, and of course he is competent to act upon that information.

Do you mean that Mr. Cordell has the benefit of that paper in case you are not able to attend yourself?—Certainly, if I request Mr. Cordell to attend I state to him the cases to which I wish call his attention.

Then the Committee are to understand that Mr. Cordell's attention, when he visits for you, is only called to such cases as you have placed upon that paper?—No; if any cases have intervened since the time of my previous attendance they are of course pointed out to Mr. Cordell, and he goes round the house as I do, and sees if there be any new case.

You do not consider that every person who shall be mentally afflicted is in point of fact so far an invalid as to require the constant attention and superintendence of a medical man?—Certainly not.

Then in fact you pay no attention to the curative process in restoring those other individuals who have not bodily ailments?—I have not made myself understood; my attention is directed to all cases where the malady is capable of amelioration from medicine; I would say this, taking twenty patients for example, out of that twenty ten shall have been twelvemonths at Bedlam or Saint Luke's Hospital, others shall have been in their present situation many years, I should say distinctly that

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that I have no hope of ameliorating those cases by medicine ; I should say that thus far their general health required attention to see that there was no bodily illness supervened upon their disease of mind ; the other ten I will admit are curable or capable of relief, and so far as their cure is capable or relief can be effected, there are no means left untried.

Is it the fact that your attention is solely directed to their bodily complaints, and that you do not pay any attention to other gentle means which may bring about a cure without medicine ?—If I see any case that would be likely to be relieved by any peculiar plan of treatment I suggest it.

Does Mr. Cordell look to that ?—I have no doubt he does.

Have you ever made those suggestions in writing ?—No.

You attend both the houses of Dr. Warburton ?—I do.

You attend likewise at Saint Luke's ?—Yes.

Have you any private houses of your own ?—Not any.

None where single patients are ?—No.

There is a person of the name of Dunston steward of Saint Luke's ?—He is my father.

Has he ever had any establishment ?—Not that I know of.

Do you attend any private houses ?—I attend in such cases as I may be sent for.

Are you in regular attendance at any private houses ?—Not any except Mr. Warburton's establishments.

Do you know the house that was kept by a person of the name of Mary Foulkes ?—I do not ; I know there is such a woman, I never was in her house to my knowledge.

Does not the house in Mount-street belong to your father ?—I am not aware of it ; I know very little about my father's property.

Do not you know anything about his business ?—I know he occupies the situation of superintendent at Saint Luke's Hospital.

You attend at other establishments as a professional man ?—Occasionally.

Will you mention those establishments ?—I have seen patients at Sir Jonathan Miles' and at Mr. Burrough's at Hoxton ; I have seen cases at their own houses occasionally.

Do you attend at any other establishments ?—No.

At no infirmary ?—No.

And that is your whole professional employment ?—Yes.

Do you mean that you do not practise generally as a surgeon ?—I have said that I do practise generally.

Then you mean that that is your whole professional employment as to any public establishment ?—Exactly.

Your private practice is very considerable, is not it ?—I do not know that it is very considerable.

You have an ample share of practice ?—I presume that I have a fair share of practice.

Will you have the goodness to state whether or no you can recollect the circumstances attending the death of one Ferguson in the last spring ?—I did not attend him at his death, but up to a very short period of it.

At what period before his death did you discover that that man required medical attendance ?—He was under my care some weeks.

What was the matter with him ?—He died from general dropsy and effusion into the chest.

Was not there a representation made by the visiting surgeon of Saint Pancras as to that man's disorder some days previous to his death ?—A few days previous to his death I heard that he desired that he might be bled, but I should consider that in bleeding him I should have accelerated his death.

When did he desire him to be bled ?—I do not recollect the date immediately.

Was that the first time that you heard that this surgeon had considered him in a dangerous state of health ?—I think it was.

Then the Committee are to understand that the time when he stated that that man should be bled, was the first intimation that you had of any other medical person taking notice of his disease ?—I should state, that Mr. Cordell is frequently at the house without my request ; he is intimate with Mr. Jennings, and he is frequently there without my request ; he has frequently asked to see the patients that may come in in the intervening days of my regular attendance, and I recollect Mr. Cordell stating to me the case of this said Ferguson, and that he had been required to be bled

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bled by the attendant surgeon of the parish to which he belonged, Mr. Dillon, who has alluded to the case in a very unwarrantable way in a pamphlet he has published.

Had you any communication, through Mr. Jennings, as to Mr. Dillon's opinion of the state of that man's health?—Not from Mr. Jennings, from Mr. Barnard, who had the care of him.

How long previous to Ferguson's death was that communication made to you?—I cannot fix the date with precision.

Was that man confined to his bed?—Not confined to his bed, he was able to walk about.

Do you think that his walking about in that state of disease was or was not good for him?—I consider it was a case in which it was immaterial whether he did or did not, it could not be injurious to him, and if it afforded a little relief to his mind it might be beneficial.

If he complained very much of the noise that was about him, would it not have been more alleviating to his mind to have been removed from that noise?—He might have been removed from it if he wished.

Where?—Into rooms where he would not have been affected by noise.

Do you take upon yourself to state that he never expressed any wish to that effect? He never expressed it to me.

How often did you see him, previous to his death, during the last six weeks; two or three times?—More than that.

How long before his death did you see him?—A very few days previous to his death; Mr. Cordell saw him the day previous.

Did you make any alteration as to his diet?—Yes.

How soon did you cause that alteration to be made?—So soon as I saw the general state of debility in which he was, I desired that he might have such things as would tend to keep up his system.

How long previous to his death did you ascertain that state of debility?—It was some weeks; I suppose it might have been about five weeks.

Do you mean to state that he was removed to what is called sick diet about five weeks previous to his death?—There is no regular sick diet, but such things are ordered as are deemed suited to the case; he was put upon a more liberal diet than the usual allowance of the house, in consequence of the state of debility in which he was.

Was that by writing or by word of mouth?—By word of mouth.

Then all directions as to change of diet are made by word of mouth and not by writing?—I did not make it in writing.

To whom do you give the directions as to change of diet?—Most commonly Mr. Jennings is with me in going round; if he is with me, to him, if not, to the person having the care of the patients.

Then if those individuals happen not to have good memories they may make a mistake?—Such a thing is possible but not probable.

When you visit a number of patients do not you think it is possible that some misapprehension of your directions may take place?—I should think not, for this reason, if I had yesterday given directions for a change of diet to A. B. or C. I should to-morrow, when I saw him, ask if such change had been carried into effect.

Would you be able to do that upon your own memory?—I should.

Do you mean to state that your memory is so good, that after investigating the number of patients placed under your care in that establishment, upon your next visit you are able to recollect the different sorts of diet that you verbally directed with respect to each patient; that you are able to recollect, without any note, that some were to be placed upon a low diet and others to be placed on a higher diet, so as to be able to inquire whether your directions have been specifically complied with?—I should think that no particular exercise of memory would be required; I have the names of the patients and the nature of the medicine prescribed.

You were understood to say that you made no note?—I make a note, but I keep none, as soon as the list is full I renew it.

How long may you keep that?—About a week or ten days.

Can you show the Committee any of those papers?—I have not one about me, but I have one at home that is in use.

Are there not different descriptions of insanity?—Yes.

Does every description of insanity receive the same diet, unless your attention is particularly called to the case by some bodily ailment?—I believe it does.

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Do you conceive that a man that is furiously mad should be placed upon the same diet as a man that is melancholy mad?—No; I should say that the patient that is furiously mad requires a better diet than the one that is melancholy mad.

Will you state that that difference of fare is observed throughout Mr. Warburton's establishment?—I have no doubt that it is.

Is that in consequence of your directions, or in consequence of the general rule of the house?—In consequence of both; there is a general rule that patients in a state of high excitement and exhaustion require more support than others.

Do you mean to say, that that variation is observed with regard to every one?—I believe it to be so.

What is your reason for coming to that conclusion?—The reason that I have stated, that it is the general practice of the house; and it is peculiarly pointed out by myself as the medical attendant.

How do you know that it is the general practice of the house?—As I know any thing else.

That being the case, must not there be a great variety of diet in so large an establishment?—I do not know that the variety of diet would be so great. There is a difference in the proportion of diet given to the individual and the quality of it; that is to say, in one instance, meat and table beer is given, in other cases, instead of solid meat, some beef-tea and porter is given.

And also different proportions of diet?—Different proportions of diet.

Will you take upon yourself to say, that that is adhered to in every instance in the house of Mr. Warburton with respect to pauper Lunatics?—I believe it is.

Can you be deceived in that fact?—I might be deceived, because I do not see it administered to the individuals.

Have you, as the medical attendant, ever inquired into the fact of what the diet of each individual is?—I have unquestionably.

You see the patient when he is first sent in, and then you prescribe the diet upon which you conceive he ought to be maintained?—I do not precisely do that; if there be any thing peculiar in the case requiring peculiarity of diet, I point it out, that it may be attended to.

If there is no peculiar diet directed, they go upon the common diet of the house?—Exactly.

What do you think is the average difference of diet in ten patients that may be brought in, how many of those ten patients may be upon the same diet?—Out of those ten patients probably half of them or more might be patients such as I have alluded to, whom medical treatment would give no relief to, and they would go upon the regular establishment of diet throughout the house.

Then you mean to say, that in those cases not only no cure could be effected, but no alleviation of the disorder?—Certainly not.

Among the other five, how many varieties of diet might there be?—I might perhaps direct that one might have two or three glasses of wine in the course of the day; I might direct that another might have different treatment.

Then a large proportion of those that are admitted do require special diet?—A large proportion of all those that are admitted require and have special diet.

You are speaking of the pauper lunatics?—I know no distinction between them and the others; the comfort and health of the one is as much attended to as that of the other.

Then, in fact, any general return of the dietary of that house of confinement would not convey a correct idea to the Committee of the sort of diet upon which the patients generally live?—There are very great variations from the regular diet, certainly.

You are in the habit of seeing the infirmary?—Yes.

Has it always, in your opinion, been in a fit and proper condition for the reception of sick inmates?—Indeed it has; I am only astonished that it can be in so fit a state as it is.

Is it not positively clean and sweet?—If I go into the room at the moment that a patient has had an evacuation, of course there must be a smell, but it is immediately removed, and the patient is made as clean and as comfortable as possible.

Were you in attendance last August?—Yes.

Do you think that in any part of the month of August the infirmary was in a particularly dirty state?—I have no recollection of anything particular.

There was nothing at all extraordinary in the state of that infirmary in the month of August last?—I am not aware that there was.

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There was nothing to which your attention was called?—No.

This is the statement which has been given to the Committee; a gentleman says, “We went into the infirmary, and found a considerable number of very disgusting objects, a description of pauper lunatics, I should conceive chiefly idiots, in a very small room, they were sitting on benches round the room, and several of them were chained to the wall; the air of the room was highly offensive and oppressive, inso-much so, that I could not draw my breath; I was obliged to hold it, while I took a very short survey of the room;” does that describe the general state of the infirmary?—It has never so suggested itself to me.

Will you take upon yourself to say, that that is not a true representation?—I cannot do that; I do not know the precise moment when that gentleman was there; I cannot tell what might have given rise to the statement there made.

Was it in that condition in any part of the week between the 20th of August and the 1st of September?—I am not aware of it.

Then that statement is incorrect?—It may happen when I go into the room that that which I have alluded to has occurred, a patient may have had a natural evacuation, which must produce an offensive smell, but if I go in half an hour after, the effect of that is gone.

There is a further description of it in these words; “It contains a sort of patients called wet patients, they are chiefly in petticoats; they are known to gentlemen in the habit of inspecting houses of this description; they appear to be of the worst description of decided idiots, and the room was exceedingly oppressive from the excrement and the smell which existed there;” do you conceive that to be a correct description of that room at that period?—I would not doubt the correctness of any man unless I had ample reason to do it; it was the impression upon Mr. Hall’s mind I have no doubt.

Was that impression, according to your mind, correct or not?—I cannot say, unless I had been present at the time; I have already admitted that such a thing may occur, and having admitted that, I cannot question the authority of Mr. Hall.

From your frequent visits to this infirmary, do you conceive it probable that such was the state of the room at the time; is it an ordinary or an extraordinary occurrence?—I will not say that it is not possible, but I will say, that if Mr. Hall had made a second visit he would not have found the same thing; I do not mean that it would have been corrected in consequence of anything Mr. Hall said; but the circumstance in all probability would not have transpired that he should have gone, a second time, at the moment when such a temporary nuisance existed.

Do you make a point of going to the infirmary every time that you visit the establishment?—I do; it is in the infirmary that the most serious cases occur.

Then you consider the infirmary under your particular care?—I consider all the patients under my particular care.

The question refers to the actual state of the infirmary?—If I were to go into the infirmary, and saw anything that militated against the well-doing of the patients, I should conceive it my duty to state it, and to have it corrected.

You consider the state of the infirmary as a room to be under your own particular care?—Not exclusively under my care; under my care medically.

You consider it your first duty in visiting the house to visit the infirmary, as that is the particular object of your attention?—I do.

Did you never go to that establishment without visiting the infirmary?—No.

When a new patient is brought in, does he undergo examination by you?—If to-day is my day of attendance, if he be brought in during the time I am there, I see him then; if not, I see him the next day of my attendance, unless it be a case of urgency, when I am sent for.

Do you make any difference between those that are sent as incurable from Saint Luke’s or from Bedlam, and those that are not sent in that way?—Certainly.

What difference do you make?—I consider the cases that are sent from Saint Luke’s and from Bedlam as admitting very rarely of any amelioration of their disease.

Do you think that an individual that is afflicted with insanity for above a twelve-month is beyond the reach of medicine?—Not entirely; but I presume that the cases that are relieved after twelve months continuance of the disease bear a very minute proportion to the whole number of cases.

Do you sign certificates of admission to that establishment?—Sometimes.

It has been stated, with regard to the infirmary, that one of the convalescent paupers

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paupers was employed to clean the windows, and that the stench of the room was so great that it made him positively sick; is that probable?—I should think not.

Have you any hesitation in saying that that, according to your view, is not possible?—Indeed I think not; a man must be placed under very peculiar circumstances with respect to his stomach to be sick under such an operation.

How many have you seen sick in that room at one time?—Some eight or ten.

What is the size of the room?—That I am not prepared to answer.

Is it as large as this (*Committee-room No. 1*)?—It is as large as this, not so high.

Is it well ventilated?—Every possible care is taken in ventilating all the rooms.

Is there any means either of giving warmth or of letting in fresh air?—There is a stove in the room, and there are ventilators in the room.

Then according to your belief, the statement you have heard read of the state of the infirmary is not a fair representation of the usual state of it?—Certainly not, of the usual state of it.

How often in the course of a day do you suppose that that infirmary is cleaned?—I believe that when a patient has had occasion to evacuate the bowels, the fæces are removed as instantaneously as they can be; they are not suffered to remain.

Is there only one male infirmary?—There are two rooms in which the male patients are particularly kept; if they should exceed the number that those rooms are capable of accommodating, there is a room in which they may be put.

There are three rooms then, in fact, in which sick male patients are occasionally placed?—Yes; sick patients may be placed also in private rooms: there are two rooms that are distinctly appropriated to invalids on the male side, and there is a third that is occasionally used for them.

Do you mean to say that you see, when you visit that establishment, all those three rooms?—I believe I see every room in the house.

And specifically those three rooms?—Certainly.

Do the observations you have made with regard to the cleanliness of those rooms refer to all those three infirmaries, or only to one of them?—To the whole of them.

Do you recollect the infirmary being whitewashed in August last?—I do not remember the precise time; it frequently is whitewashed.

You must have heard of the visit of Mr. Birdwood and Mr. Mills to the infirmary about that period?—I never heard of it.

Then are the Committee to understand that what has been now intimated to you by the Committee is the first that you ever heard of Mr. Hall's saying it was so offensive?—I am not aware that I have heard the name of Mr. Hall before.

Have not individuals from the parish of Mary-le-bone visited that institution, and expressed dissatisfaction?—I heard that Lord Robert Seymour had visited the house, and expressed great indignation at not being allowed to visit the patients late in the evening.

Was any representation made to you by any individual that objections had been made to the state of the infirmary in August last?—There was not.

Do you not consider, that as you have the general superintendence of the infirmary, it was the duty of such persons to communicate to you that those complaints had been made with regard to that infirmary?—I do not know that it was their duty; I think that courtesy should have led them to do so.

Then the Committee are to understand that you were perfectly unaware of any such complaint having been made?—Yes.

Has it ever happened that you thought that the establishment was too much crowded with patients?—It has been occasionally.

Have there ever been representations made by you as to the propriety of reducing the number?—I have considered it too crowded.

Have you ever made a representation so strong as to cause their removal, or a portion of them?—The difficulty was where to remove them to; there have been occasionally patients removed from the one house to the other in consequence of the crowded state of the house.

You do not know in consequence of what representation they were removed?—No.

But you have never made a representation that has produced that effect?—I would not say that it was not from my representation that the house was too crowded.

Did you ever take upon yourself to state to the persons having the superintendence of the establishment, that the crowded state of the patients was injurious to them?

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—I do not know that it has been crowded to that excess; I have stated it in conversation to Mr. Jennings.

Have you ever given directions that it should be relieved, or that you could not be answerable for the state of the patients?—No; I did not conceive it be so crowded as to injure the state of the patients health.

What was the inconvenience?—There was an inconvenience in the number of persons sleeping; that is to say, it would have been better if there had not been so many.

You have stated that the house was never so crowded as to be injurious to the patients?—Not to their health.

Or to their mental recovery?—No.

Is the house, generally speaking, well constructed for the purposes of a lunatic asylum?—The White House is not so well constructed as it might be, because it consisted of more than one house originally, and that very old.

It does not admit of much classification, does it?—The classification adopted there is as to high and low cases.

Is there any classification as to convalescents?—Yes, to a certain degree, not to a great extent, nor does it appear desirable.

In point of fact, all the male patients can mix with each other, if they like?—If they are not in a state of confinement.

By confinement, you mean positive coercion?—Yes.

Do you know whether they do or do not?—I believe occasionally.

Is that one point to which your treatment extends?—I do not think that any practical advantage arises from what is termed classification.

Therefore, you never make that a point of your medical inquiry?—No, except the keeping the noisome and disagreeable patients from those in a state of convalescence.

But so far as the mental disease is concerned, you conceive that those who are very much deranged may as well mix with the others as not?—I believe there are many cures in consequence; I believe there are more cures effected in establishments of that description, than of isolated cases.

Is not there some separation between the noisy patients and those that are quiet?—Yes, the noisy patients are confined.

Are not many of the patients noisy that are not dangerous?—Yes.

Are they kept confined, merely because they are noisy?—Not in restraint, but they are kept in a room by themselves. I have said that the classification goes so far as to exclude high patients from those in an opposite state.

And therefore you exclude high patients by keeping them confined?—I keep them in a room alone.

Therefore the high patients and the low patients never can mix?—I do not say never, because the patients may open the door.

Are there no means of preventing that?—Not unless you lock the patients up.

Then how can there be any thing like a classification, if it is left to the patient, whether he chooses to go into the next room or not?—A direction is given to the patients not to do so.

Then you trust to an insane patient minding what you say to him?—They are not so insane as not to know what you say to them.

Then the high patients, who of course do not care what happens to the low patients, are allowed to go into the next room, unless they mind your injunctions?—Unless they are so furious as to be kept in confinement.

Is there any restraint upon the innocent high patients, excepting that which arises from your injunction to them?—If a patient of that description did not obey an injunction given to him, he would have a further degree of restraint imposed upon him.

Will you take upon yourself to say, that there are restrictions enough to prevent that class of patients mixing with the other class?—I think, as far as regards the general practice, there are.

In point of fact, are not all the violent patients accessible to the convalescent patients?—Not all of them.

You know that there are three day rooms in which the pauper patients assemble, is there any one of those day rooms specifically appointed for the reception, during the day, of the violent patients, into which no convalescent patient can enter?—Not exactly that; not in which no convalescent patient can enter; but it is a thing of rare

rare occurrence, inasmuch as there is an understanding that the patients are kept apart in those rooms.

Is there any room of those three specifically appointed for convalescent patients, into which no furious patient can enter?—But in the same ratio that the other might happen.

What do you mean by the understanding you speak of; do you mean that directions are given by the superintendent to the patients themselves, that they are not to enter into those rooms, or that any prevention takes place by the personal exertions of any of the keepers or servants?—Direction is given to the servants to keep such patients as are high and noisy in a room by themselves, and to keep such as are in an opposite state by themselves, but the doors of those rooms being open, it may occasionally happen that a furious patient will go into the ward of one that is not furious, or a patient that is not furious will go into the ward of one that is furious.

Have they separate airing grounds?—No, they have the same airing grounds.

Are they all together in the airing grounds?—They are not there at the same time.

Are the Committee to understand that you know, from your own knowledge, that they are separated in their airing grounds?—The high patients and the patients in an opposite state are not in that airing ground together, but upon the accident that I before stated, casually.

Do you make a point of regularly visiting the establishment every other day, whether there are bad cases or not?—Yes; except sometimes on a Sunday I may not do it.

What is your attendance at St. Luke's, do you go over the establishment regularly?—Not over the establishment regularly; I see such surgical cases as I am directed to attend; I attend only as surgeon.

You state that you occasionally do not attend at Mr. Warburton's on a Sunday; are you in the habit of seeing the treatment of the crib patients on a Sunday?—I have seen it.

What is their treatment?—They are generally kept in bed upon a Sunday.

Are they forcibly confined to bed?—Some forcibly confined, and others not confined, but lying there voluntarily.

What is the nature of their complaints?—They are generally paralytic or furious patients.

How long does that confinement last?—They are put to bed on the Saturday, and I believe they lie in bed the whole of Sunday.

Do you conceive it beneficial to patients in that state that they should have a periodical confinement of that nature?—I so far consider it beneficial, that I frequently desire them to be put to bed at other periods; I believe Sunday is the day selected for that purpose, as being one upon which they are not interrupted by visitors.

How long have you been aware of that practice in the establishment of confining the crib patients from Saturday evening till Monday morning?—It has held ever since I have known the establishment.

Does that exist in the other establishment at the Red House?—It does.

Are you aware of that practice having been altered lately?—I am not.

You are not aware of Mr. Warburton having expressed any disapprobation of it?—No.

You are not aware of any representation having been made by the parish of St. George's, and the practice having been discontinued in consequence?—No.

Have you ever had any conversation with Mr. Warburton upon that subject?—Not particularly upon that subject; I have had general conversations with him.

Do you mean that you have had, since these inquiries have been going on, no communication with Mr. Warburton upon the subject of those patients being confined from the Saturday night till the Monday morning?—No.

Are you frequently in the habit of seeing Mr. Warburton?—Yes.

How long is it since you visited the establishment on a Sunday?—I have been in the practice of visiting generally on a Sunday up to the period of six weeks last.

You visited the crib-rooms on a Sunday?—Yes.

Have you lately found the crib-rooms in the same state as they used to be in?—Yes, I find no alteration in the crib-rooms, except that there are fewer patients in consequence of some having been removed.

When you say that they are confined upon a Sunday, do you mean that they are

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not taken up any part of that day?—I did not make use of the term confined; they lie in bed; the more furious ones are confined, the others lie there; and if they expressed any desire to be taken up they would be so.

Are they washed on a Sunday?—Yes.

Do you know that of your own knowledge?—Yes, I have frequently been in the crib-rooms on a Sunday when the actual washing has been going forward.

What is the number of patients at St. Luke's?—Three hundred, but they are not full.

Is there a resident medical man there?—There is.

If that is thought necessary, is it possible for you to pay sufficient medical attention to the large number which there is at Mr. Warburton's?—Unquestionably it is possible.

You say that you have been present at the washing of crib patients on a Sunday morning; at what hour was that?—I cannot say.

Are you aware whether they are washed with cold water or with warm water?—With warm water, certainly.

Will you recollect, if possible, the time when you saw those patients so washed, and the hour at which you saw them?—I cannot state either the day or the hour, because I am there at all hours; but this I mean to say, that I have seen patients washed in a crib-room on a Sunday, and I believe it is the practice when a patient requires it, at any hour of the day to do it.

Have you not stated that you generally went about eleven o'clock in the morning?—I go at any hour that is most convenient to myself.

What is the usual hour at which you do go to that establishment?—The usual hour may be about eleven or twelve o'clock.

At what hour on a Sunday have you ever been at that establishment?—At various hours.

Were you ever at that establishment as early on Sunday as ten o'clock in the morning?—I think I have.

Not earlier than ten?—I should think not earlier than ten, because, unless there is something particular, I do not leave home till ten.

Then you never were at that establishment on a Sunday earlier than ten o'clock?—I do not think it is probable; I may have been.

You do not think it probable that you ever were at that establishment earlier than half-past nine?—It is not probable.

Unless you had been called there specially, you would not have been there earlier than that?—Certainly not.

Do you go of yourself, or are you sent for on a Sunday?—I have been there on a Sunday when it came in the regular course of my attendance.

This washing, it is presumed, may be repeated several times a day?—Yes.

You do not mean to say that the washing to which you have alluded is the first washing that they had in the day?—I wish to say, that it was an individual case of washing, arising from necessity.

Then you do not mean to say that you ever were at the establishment so as to see all the crib patients have their general morning washing?—No.

Are you able to state, from your own knowledge, what the covering of those crib patients was in their cribs?—Generally two blankets, sometimes but one.

Were they always chained naked in the crib upon straw?—They are naked, they have no body linen.

Do you consider that one blanket is sufficient?—I should think, in the cases that I have in my recollection, that it was.

In winter?—Yes.

Are you at all aware that the commissioners have remonstrated more than once on the ground that the two blankets were insufficient?—No; I have heard it stated that the commissioners have expressed a belief that in the Red House they had not sufficient covering in the winter.

Do you conceive it possible, that any patient lying in one of those cribs perfectly naked in the depth of winter, could possibly be sufficiently warm with one single blanket?—I do believe that the quantity of straw they have keeps them quite as warm as a blanket, or probably more so, inasmuch as they are not able to throw that off, when they would a blanket.

Does the straw lie over them?—They lie in the straw.

Are the crib patients laid naked in the straw; is there any blanket or rug between them and the straw?—I have said that they generally have two blankets, one above
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and one beneath them; but a patient of that description would never keep the blankets in that position, they are generally surrounded with the straw.

You have alluded to a certain visit paid by Lord Robert Seymour to that establishment at night, when he was refused admission?—I have heard of it.

Do you think, medically speaking, that there was any valid ground for refusing the admission of properly authorized visitors at any hour of the night or day?—If I had been the superintendent I should have thought it not correct.

Speaking of it as a medical question, do you think it possible that either the bodily or the mental health of the patients would be seriously inconvenienced by occasional visits of properly authorized persons at any hour of the day or night?—Not seriously inconvenienced, but they might be made uncomfortable; the females are not void of delicacy although they are in that situation.

Then you think it would be improper to allow visitations of that description?—I think it would be improper.

And injurious to their health?—I think many of them might be excited.

What is the regulation at Mr. Warburton's house as to the hours at which it may be seen by properly authorized visitors?—I believe it may be seen at any time except when they are in bed.

Are you aware of any alteration having been made in any of the rules in that respect, subsequently to that visit of Lord Robert Seymour?—No.

Then if any such alteration has taken place it is without your knowledge?—It is, I have no interference with the visitation.

Then, in point of fact, can you state whether any such alteration has taken place?—I cannot.

When you say that you consider the patients are sufficiently warm with one blanket, do you mean that the state of fever they are in contributes to their general animal warmth?—No; those are cases in which there is less animal warmth than in others; there is a great deprivation of nervous energy, and consequently a want of warmth, but the straw appears to me to keep them warmer than a blanket would do.

They are wet patients, are they not?—The cribs are so constructed that the wet runs off through the straw, when it would not run through a blanket.

Would not the straw become wet?—It does not become wet so readily as might be imagined; it is not absorbed by the straw, it passes through; there is a substance now that has attracted the notice of persons having the charge of such patients, common sea weed, which is said to possess advantages over the straw, in being softer and admitting also the passage of fluids through it.

Is it your decided opinion, that the patients in Mr. Warburton's establishment, consisting of nearly 500, have sufficient medical attendance, both for mind and body by your visits every other day, averaging three hours each, and when you cannot attend, by Mr. Cordell visiting for you?—It is.

Is there any classification at Saint Luke's?—Not beyond keeping noisy and offensive patients separate.

Upon the same system as is pursued at Mr. Warburton's?—Just the same.

Are they confined upon the Sunday in the same manner?—They are.

When you give your orders respecting the treatment of the patients, do the patients hear you?—Most generally.

Have the patients ever complained that the orders were not fulfilled?—No.

How many regular male keepers are there attending upon the pauper lunatics in Mr. Warburton's establishment?—The average number of keepers is one for about 25 patients.

If you are in the habit of attending every other day, you must know how many there are in the establishment?—I made a calculation from curiosity a few days back, and it is about one to 25 at Mr. Warburton's.

As you have been in the habit of attending Mr. Warburton's establishment, the Committee wish to know how many keepers there were attending upon the male pauper patients previous to Christmas last?—Five I think.

Five regular keepers?—Five regular keepers.

No one of them was a convalescent patient?—No, I am speaking of servants.

Do you happen to recollect their names?—The names of two I recollect as having been long there, and those are Thomas Dolby and Bernard.

Can you state the names of any others?—I do not know their names.

During the time that you have known the establishment has it been the custom to employ five regular keepers there?—I do not know any variation in the number of keepers, it has been in the same proportion I believe.

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Has it never been the practice to employ convalescent patients as under keepers?—The convalescent patients occasionally assist in the care of the other patients, not permanently.

Do you, as a medical man, approve of beating the patients?—Decidedly not.

Do you think that you should have been informed whenever any patients have been beaten?—Yes.

Therefore you have every reason to think that the strap is never administered?—I never heard of such a thing.

If a complaint was made by a patient you would attend to it?—Most decidedly, I have frequently done so.

Mr. William Daniel Cordell, called in; and Examined.

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ARE you a surgeon?—I am.

Do you occasionally attend at Mr. Warburton's establishment at Bethnal Green to assist Mr. Dunston?—I do.

And you occasionally attend for him during his absence?—Always.

It frequently happens, therefore, that you attend when Mr. Dunston is out of town?—Always.

In case Mr. Dunston has commenced a curative process either of mind or body upon any patient, how are you acquainted with the system which he has pursued?—Most readily, I have access to his books; and I am always furnished with a list containing the names of the patients and the particular nature of the disorder, with the course of medicine they are pursuing; it is done in a very laconic and in a very correct way, because it would not be competent for me or any other person merely seeing a composition of pills or powders to know what it was.

Then the Committee are to understand that that written statement which is given by Mr. Dunston to you contains the medicines that have been administered to those patients, and a general statement of the case?—Exactly so.

When you commence the treatment of a patient that Mr. Dunston has not seen, do you follow the same plan in returning this written paper to him?—Identically so; I put down the patient's name, the nature of the disease, and prescribe the medicine and send it to his house where every thing is prepared, and from his house they are furnished.

Then all the medicines are prepared at Mr. Dunston's house?—The whole.

When you have occasion to order any medicine to be administered to any patient, do you send the prescription to Mr. Dunston?—Always; Mr. Dunston's house is very near my own; I very frequently walk to his house myself, and to his assistant explain why I deviate from anything that has been pursued.

Do you ever give directions for an alteration of diet?—If I see necessary.

Do you ever see it necessary to give any directions for an alteration of diet in the establishment?—I do.

To whom do you give those directions?—Either to the servants, to the keepers, or to Mr. and Mrs. Jennings; in fact I may say that Mrs. Jennings invariably goes round the female part of the establishment with the surgeons; that is myself as one of those that regularly attend as well as any visiting surgeon that comes.

Do you ever give those instructions for changing the diet with regard to the male patients in writing?—No, I do not think it necessary; I would if it were necessary.

How do you know that those directions you have given have not been neglected, do you keep any record of the diet that you order for each individual patient?—I do not keep any record, the patients not being mine; I attend as the substitute for Mr. Dunston, and I ask the question, and I have every reason to believe a correct answer is given me; has so and so been followed; if I find a man sinking, I say let this man have wine, if he has been accustomed to wine give him brandy, and I have every reason to believe that it has been most strictly followed.

Are you speaking with regard to the pauper patients?—I am speaking with regard to the pauper patients; with respect to the higher order of patients, of course if we recommend champagne or burgundy it is followed immediately without any restriction.

What sort of register is it that Mr. Dunston keeps of the patients?—A very correct one.

Is it in a book?—A large folio volume, and I believe for neatness as well as correctness of detail it is a pattern for every professional man to adopt.

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Does that constitute the means you have of going on with the system of medical attention?—Precisely.

That constitutes the instructions which he hands over to you?—Perfectly so; for months back we have had occasion to refer, and I have never found his young man fail in the reference; I have said look at that book, I am applied to for a repetition; he says I have looked and I cannot find it; I say go back further, and it is invariably found.

Is this book kept at Mr. Warburton's or at Mr. Dunston's?—At Mr. Dunston's.

In that book is there any thing else besides Mr. Warburton's patients?—I believe it may contain at other parts of the book his private practice, he has a separate common book for Mr. Warburton's house, but that is what is called a day book; but that is all very faithfully transcribed into the book for reference at future occasions.

So that if you were to visit any person that was such, you might, upon reference to that register of Mr. Warburton's patients, discover the system of treatment which had been followed for weeks before?—Precisely so.

When you visit the patients, he hands the book over to you?—Yes.

At this moment he is not attending the establishment, on account of the illness of his wife?—No, he has a very able assistant.

At this moment you are doing the business for him?—I am.

Therefore you have the book in your possession?—No, I do not have it in my possession. I only have it when I want to use it; the book is at his house; I take an extract from it; the book is a voluminous one, and I send it immediately back to Mr. Dunston, in order that the preparations that may be required may be made.

Does the register contain the symptoms of the disorder, the prescriptions that are given, and the diet that is directed to be given, or what does that register contain?—The nature of the malady, and the medicines which they are taking, and from that I should naturally infer, if I see the person, the diet that would be suitable under those circumstances.

So that in point of fact, you could trace for years back by that book the system of management that has been administered to all the pauper patients in that establishment?—No doubt of it.

What is the difference between the register and the day book?—I believe the day book is only a rough copy book.

Are you quite sure about all those things being contained in the register?—Most undoubtedly, and if I have occasion to refer to it, I find it correct.

Will you have the kindness to describe that book to the Committee accurately?—It contains the name, the complaint and the medicine.

What do you call that day book?—I should call it the day book.

Are the contents of that day book afterwards transcribed into a register?—I believe always.

Have you ever seen that register?—I have constant access to it.

And if you wish to refer to any case that has occurred, you can always find it?—Yes.

How far back do you think you could trace the medical treatment of any case in that book?—That is not possible for me to answer.

For a twelvemonth?—For years and years; I could not answer that question with accuracy, for this reason, Mr. Dunston had a partner who about four or five years since died; during the life-time of his partner, he scarcely ever required my assistance, unless it was some very important operation; since his death, I can vouch for its accuracy.

That is for six years back?—Yes.

Then for six years back you can trace every thing in that book?—No doubt of it.

You attended a man of the name of Ferguson?—I did.

Did you attend him at the beginning of his disease?—I never saw him till the day before he died; I might have seen him, but I recollect the case perfectly well.

From this book, which you have described, will it be in your power to state to the Committee the course of medicine through which that man went, and also the course of diet upon which he was subsisted?—With regard to the diet, it would be better answered by the keeper, but I have no doubt that any diet that was prescribed would be most regularly furnished to him.

In the book you have mentioned, could you find any entry by which you could state to the Committee the medical and the dietary treatment of that patient for six weeks previous to his disease?—I think the medical treatment without doubt.

Mr.
W. D. Cordell.

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You say that the medicines which are administered furnish a criterion to you of the sort of diet upon which the patient ought to be put?—Very nearly so.

Are they enough to enable you to form an opinion of what the diet was?—The diet is, in many cases, regulated according to circumstances; often the patient cannot or will not take the diet that is prescribed.

Therefore the book will not contain the diet?—No.

As to that man's positive disease, what did he die of?—Dropsy, decidedly; and if the Committee will allow me to give my opinion upon that case, I shall feel great pleasure; the day before that man died, I was requested by one of the most valuable servants in that establishment to see the man and to bleed him; the moment I was requested by Mr. Bernard to do so, "Mr. Bernard," I said, "bleed this man!" my phrase was, "Good God! the man wants blood put in him;" his legs were swollen, he was dropsical of the chest, and a general dropsy, and a pulse scarcely to be felt; I requested that the man might have, in addition to the diet that he had, some wine, and if he had taken wine, a little brandy; the man was sinking fast, and the phrase I made use of was, "this man is dying, he is moribund."

Did you ever look back to the medical treatment of that individual in Mr. Dunston's book?—I cannot say that I did.

Was that individual in a state of health in which it would have been beneficial to him to be removed from the noise to which he was exposed?—I am not aware of any particular noise to which he was exposed.

Did he complain of being racked by the noise?—That is a very common complaint of the patients; they say they have a noise and a confusion in their ears.

You think that the medical treatment of Ferguson is stated in the book you have referred to?—The medical treatment decidedly.

Will you put down upon paper the description of that book?—I should call it the Bethnal Green Pauper Book or the White House Book, but I do not write in that book, I only write on paper.

What should you call it if you wanted it to be sent to you?—I should say the book in which the register of patients with their medicines is recorded.

Where is that book kept?—At Mr. Dunston's.

Had you ever any list of patients on a separate sheet of paper?—I have a list of patients always on one sheet of paper, "White House, Bethnal House men and women."

Then in fact all your knowledge of the cases is derived from the common day book?—From personal inquiry and investigation.

You say that the previous treatment you are made acquainted with by some document, is that document upon a separate sheet of paper or is it a large book?—It is extracted from a large book into a paper.

Then the paper is an extract from the book?—Yes; there are only a few that require to be particularly attended to, the greater part are persons that are uncured patients from various quarters, for whom no medical treatment is tried.

This book has been kept for a great number of years?—I have no doubt of it.

Have you had any conversation with Mr. Dunston upon the subject of this book?—Never, but when I require it.

Is it kept as a memorandum of the amount of medicine furnished?—In the first place he could so refer to it, and say that he has furnished medicine in such a quantity; and on the other hand as a mode of information, if he requires to know what has been done.

Supposing Mr. Dunston had been asked for some register of the treatment of his patients, and to have answered that he had no register of that nature, how can you explain that answer?—I should find a difficulty in explaining that.

Must he not necessarily, when such a question was put to him, understand the sort of book you have been describing?—Certainly.

If he should have stated in his evidence that the papers which you describe, containing the names of the patients, were after a certain period destroyed, and if he should have declared to the Committee that no register was kept, must there not be some discrepancy between your evidence and Mr. Dunston's?—It certainly appears so, but I have only to say that I never received a list but what I received the fullest information of every patient that I am required to attend to, and I have seen the book repeatedly to which I have referred; whether it is now discontinued I do not know; I have not occasion to look to the books.

You have seen the book?—I have seen the book repeatedly.

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And you have already stated that you could trace in that book the medical treatment of any patient for the last five or six years?—I know that it is to be traced.

Does the book relate exclusively to Bethnal Green and the White House, or is it a book divided into different chapters; one chapter relating to the White House, and another chapter relating to another establishment?—Yes, but the page referred to has always contained that description of cases, and no others, which it professes to contain; the way that I obtain my information is by writing or asking for it rather than going to see it.

Have you had frequent recurrence to this book?—By application, I am frequently obliged to refer to it.

If it contains the account of Mr. Dunston's private practice, must you not have seen it?—I do not know that, because there are various heads; three or four pages might be reserved for one head, and three or four for another, but all under any particular head is confined to that head.

Have you ever looked into this book?—I have looked into it many times; that is to say, I have seen the book open.

When you have looked into this book, has it been with a view to ascertain the situation and the treatment of any particular patient?—Nothing but the treatment.

When you have looked into this book for such purposes, you found what you wanted?—I found what I wanted.

You visited Ferguson the day before his death?—I did.

You then saw that he was moribund?—Yes, he was brought to me in the visiting room.

Was he in a state to sit up?—I do not know.

Was he brought in in a chair?—No, led by the keeper and his assistants.

So that you did not see him in the place where he was before?—No; I had seen him.

Was he down in the list given you?—He was.

You have stated from your own knowledge, that Mr. Dunston keeps a very correct register, containing the nature of the malady, and the medical treatment of the patients, and you have little doubt that the treatment of every individual patient for six years back may be ascertained from that register?—That is perfectly correct.

Mr. *William Solomon*, again called in; and further Examined.

HOW long is it since you left Mr. Warburton's establishment?—I left on the 3d of March last.

Previous to your leaving the establishment, can you state how many regular keepers there were?—In the department in which I was placed there were three.

Were all the male pauper lunatics in that department?—In that department the whole of the male pauper lunatics were confined.

Can you state the names of those three keepers?—Thomas Dolby, William Bernard, and James Essex.

Have you any knowledge of a man of the name of Charles Beech?—Not any.

Have you any knowledge of a man of the name of Samuel Painter?—Not any.

During the whole time you were there, did you ever know more than three keepers in attendance?—There was a young man who came from the country to be engaged as Mr. Jennings's groom, but the person who was in that situation remained in it, and this man took the situation of a keeper for a few weeks.

In addition to the groom, and in addition to the porter, during the time you were there you never knew more than three male keepers?—No; and the early part of the time during some months that I was there, there were only two, Dolby and Bernard.

You are certain there were not four at Christmas last?—Unless the groom was there, there were not.

You yourself have seen patients employed as crib-room men?—Many.

And you can state, of your own knowledge, that you have seen those patients so employed in the superintendence of the crib-rooms?—Certainly, I can.

Did Mr. Jennings see every patient in the establishment in the course of the day?—I have known the time when Mr. Jennings has not been in the house all the week, except on Monday morning, unless it was when he came in with Mr. Warburton, and that was not always the case.

Do you mean that sometimes a whole week has elapsed, when you yourself have

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not seen Mr. Jennings?—I can safely say that that has been the case; I have never seen him for a week together; he may have been there, but I have not seen him.

Was it the custom of Mr. Jennings regularly to go round the establishment every Sunday morning before he left the establishment?—That is impossible for me to say; I think there were many times on a Sunday when he never came into the place, but I cannot speak positively to that.

Do you believe that the whole of the crib patients were confined during the Sunday?—There were a few, I believe, that were allowed to get up.

Have you any knowledge as to whether they were taken up and washed on the Sunday morning?—They were not removed from their cribs, unless the few that were allowed to get up; those that remained in that state from the Saturday to the Monday were never taken up and washed.

How do you know that they were not taken up?—Because I had an opportunity of going into the room, and seeing them.

You never were prevented from going into the room?—It was not a thing that was allowed, but I used to go about the house as much as any one.

Do you think they could not be taken up and washed during the time you were absent?—I am very well aware that it never was the case, because there was one of the rooms that is called No. 7, and those men were always chained the whole of Sunday; they never were allowed to get up, and many of them lay in a very filthy state, which I had a very good opportunity of seeing.

Have you seen them taken up on Monday morning?—I have seen them taken up on several mornings.

And then they were in such a state as showed that they had been in that state for a long time?—Many of them were lost; they were unconscious of the calls of nature, and in that dirty state they lay till they were taken up.

And your impression is, that they were so left during the whole of Sunday?—They were.

You have been in the crib-rooms on a Sunday, and have seen them in that filthy state?—Many times.

Have you seen them washed on the Monday?—I have, and on other days as well.

Was it cold water or warm that they were washed with?—I have seen warm water used, but generally cold.

You are aware that there was a boiler of warm water?—There was a copper, but it was not used in general.

Did you ever see a mop used?—Yes, many times.

Have you seen them washed in cold water in the winter?—I have.

Did you ever see any flannel used in the washing of them?—No.

Or soap?—Nor soap, in fact there is no soap allowed to any of the patients in the house in that department.

Do you maintain the assertion, that no soap was allowed during the period you were there to any patients?—I do, and only one towel allowed to all the persons that were there during the week.

Were the shutters closed during the whole day in those crib-rooms in the winter?—In the room that I allude to there were no shutters in it; there were merely small windows and iron gratings.

Was there any glass?—In some of the rooms there was.

In those rooms where there was no glass, were there shutters?—Yes.

Have you ever had an opportunity of ascertaining whether the letters that you sent to your brother were received?—I have asked him pointedly the question, and he stated that he never received any letter; and I likewise wrote to Mr. Ramshaw, and he tells me that he never received the letter I wrote. Mr. Dillon likewise sent a letter to me, and I never received it.

When you saw the crib patients on a Sunday, and at other times, had you any means of ascertaining what covering they had?—One blanket was what they generally had, and most of the blankets were very thin and very old, but latterly, in consequence of expecting visitors, they have every morning taken in good blankets to the cribs, and in the evening those blankets have been removed. In No. 7, particularly, I know that they used to double the blankets up, and took them to the long room, and there let them remain till the morning.

Will you state whether the male infirmary consisted of one, two or three rooms?—I think there were three rooms, but I will not be positive, for I never was in there but once, and then I was so disgusted at the appearance of the place, that at the time I was ill, I lay upon a bench in the hall, rather than go up to the infirmary.

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Mr.
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When you saw the infirmary, were there any fæces lying about the room?—I cannot speak as to that, but when I went into the infirmary, I was very glad to get out as soon as possible.

Do you suppose that that disgusting state of the infirmary arose from any neglect or from the bad state of the patients?—I suppose it arose from neglect, and likewise from the bad state of the patients.

With respect to the circumstance of their taking away the blankets, might it not have been for the purpose of drying those that belonged to the wet patients?—The blankets were not put on the cribs till after the men were up, and they were taken away before the men were put into bed.

When did that practice exist?—About three months previous to my leaving.

You still maintain the statement, that during the period you were there, three keepers and the groom were all that were in attendance?—In the early part, for some months after I was there, Dolby and Bernard were the only two keepers; for a month previous to my leaving, a lad of the name of James Essex was employed, and there was, during part of the time, a man of the name of Sharp who came to be employed as a groom, but the old groom remaining, he was not wanted in that situation, and he remained there two or three months till he got a situation; and if that man could be brought, he would speak in the same way as myself, for he was quite disgusted with the treatment of the patients.

Where is that man now to be found?—He lives at Donhead St. Andrews, in Hampshire or Wiltshire.

Do you happen to be conversant with the management of any other private madhouses?—No, I am not; I have been into other private madhouses to look at them.

On your former examination, you stated that you conceived yourself under great obligations to Mr. Jennings for his kind conduct towards you?—Mr. Jennings always behaved very well towards me; the only cause of complaint I have is in being confined unjustly.

Supposing you had been confined justly, you have no cause of complaint against him?—No.

And with regard to your confinement, he showed considerable commiseration, did not he?—As to commiseration, I was treated much the same as the other patients, and I dare say if I had conducted myself as bad as some of them did, I should have been treated in the same manner, but I always conducted myself with propriety, and I met with kind treatment.

Mr. Garrett Dillon, again called in; and further Examined.

HAVE you any reason to suppose, in the case of Ferguson, that any change of diet took place in consequence of his being in that debilitated state?—Not the slightest reason.

Mr.
Garrett Dillon.

Did you ever ask him, during the time that you took an interest in his case, whether any different sort of food was administered to him in consequence thereof?—No, never; I mentioned that I saw him a fortnight before his death, and that I observed to Mr. Jennings that he was feverish, and that animal food was improper for him, and I had not an opportunity of seeing him again till the day before his death; at that time there was one of my pupils with me, and Mr. Jennings was then present, and the moment Ferguson saw me, he complained that he was dying, that his brain was bursting asunder; I felt his pulse and said, "this man ought to be bled, he is dangerously ill, he should be bled directly;" then Mr. Jennings said, "our medical man will be here directly, and he will bleed him;" I felt a delicacy in asking Ferguson questions in the presence of Mr. Jennings, but I advised that his mother should be sent for directly; she was sent for, and she told me that she arrived on Monday morning and he was dead.

You cannot state whether that man was ever placed upon any sick diet in consequence of his indisposition?—No.

Do you know whether any other patient belonging to Saint Pancras parish was ever placed upon sick diet in consequence of indisposition?—I cannot speak to that.

When you first saw him, were there any symptoms of dropsy about him?—Not the slightest.

The Committee understand that he died of general dropsy?—Anasarca and hydrothorax is a disease rather common among lunatics, it is a disease that is difficult of detection in lunatics.

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Garrett Dillon

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Do you reckon dropsy an original complaint?—No, it is a consequent complaint. Had all those symptoms of dropsy come on in the course of the fortnight?—Ferguson had no symptom of dropsy about him when I saw him the first day. Doctor Sladebright, who has written on insanity, talks in that manner of hydrothorax.

Had he any symptoms of dropsy before his death?—Not the slightest; the moment he saw me, he said, “Mr. Dillon, my brain is bursting asunder.”

Do you mean to say that he had no symptom of dropsy about him the day before his death?—Not the slightest, my whole attention was directed to his head.

Did you examine his legs?—Swelled legs is a very common thing with lunatics. Is that dropsy?—It is anasarca.

Do you believe that that man died of dropsy, or not?—I do not think he did.

Is it your opinion that the pauper patients belonging to the parish of St. Pancras received from the medical attendant there sufficient care either as to body or mind?—It is my opinion that they do not; and if this Ferguson had received proper care, he would have been in bed when I saw him the day before his death, and he would have had the care and attention of a nurse.

Generally speaking, then, you think they do not receive proper care and attention?—Generally speaking, I think they do not.

John Nettle, again called in; and further Examined.

John Nettle.

ARE you quite certain, that when you were a crib patient you were not taken up on a Sunday morning?—Yes, I am quite confident of it, for I was as much in my senses then as I am now.

You mean, that you were never taken up from the Saturday evening till the Monday morning?—I never was.

Were you never washed on a Sunday morning?—I washed myself.

Those that were not able to wash themselves, were they taken out of their cribs?—Those that were dirty were taken down a cold passage, and were put into a tub, and washed with a mop.

Was that on the Sunday morning?—It was on Monday morning.

Did you wash yourself on the Sunday morning?—No, we had no water; we were locked in the crib from Saturday afternoon till the time that we got up on Monday morning.

Then you had no means of washing yourselves on the Sunday morning?—None whatever; we had only one blanket to cover us, and it was a very damp crib-room.

And you are quite sure that you were never allowed to wash yourself on a Sunday morning?—No.

Do you know the hot copper that is placed near some of those crib-rooms for the purpose of warming water?—Yes.

Have you ever known the crib-room patients washed with water warmed in that copper?—When they have been ill, not otherwise; not as they went out of the cribs dirty, they went into the cold water; the copper was not lighted by nine o'clock in the morning.

You never knew anybody that had been confined in a crib from Saturday night to Monday morning washed in water taken out of that copper on the Monday morning?—Never.

Did you ever see them washed with flannel?—Never.

Was any soap given to you?—Not a bit.

You are quite sure there were not two blankets and a rug to every crib?—I am quite certain there were not two blankets; there were two blankets given to us about a month before Christmas, not before that, and one of them was taken away again when it became warm weather.

Were you placed upon the straw, or was there anything between you and the straw?—Some slept upon the straw, and some put one side of the blanket under them.

Who brought you your food on Sundays?—Mr. Bernard assisted, and sometimes Mr. Dolby.

Was there a crib-room man that brought it you?—A patient-keeper, that sat over the men in the cribs, was the man that assisted to bring it.

How often in the day was it brought?—He used to bring us a pot of gruel about eight o'clock or nine o'clock; and at about one we used to have boiled beef and some potatoes.

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Were you unchained to eat it?—No, we were chained in this way (*describing it*), into a lock locked in this way to one side of the crib, and I could not get my hands to my mouth.

You are quite positive that you never were unchained on a Sunday?—I am quite positive I never was, nor any of the fourteen that was in the room with myself.

And there were none of them but what had their hands crossed?—Some were locked all fours.

How were those fed that were locked all fours?—They would lay up upon their elbow, and take their victuals.

How many regular keepers were there to attend the pauper patients?—Only Bernard and Dolby regular keepers.

When did you come out?—I was there sixteen months. I went in at the latter end of August, and I did not come out till September in the last summer.

Did you ever know a man of the name of Beech as a keeper?—No.

Or Painter?—No.

There never were more than two, or at most three regular keepers when you were there?—Only two regular keepers, Mr. Bernard and Mr. Dolby.

Besides the groom?—But the groom was not considered a keeper.

What was his name?—His name was Cooper.

You are quite sure that there were not four or five regular keepers?—I am confident of it.

Did you ever see Mr. Dunston there on a Sunday?—I have sometimes.

Often?—Very often, I think.

Every other Sunday?—Very near; if he did not come, a little man came in his stead, Mr. Cordell.

Was Mr. Jennings in the room often on a Sunday?—No.

Did he always come round every Sunday morning, to see you there?—Not every Sunday morning. I walked about the house myself, and I very seldom saw him; I used to clean the rooms, and to clean the bed furniture, and to look it over and double it up, and do every thing that I was required to do, from the time that I went in the house till I left it.

Were you paid for that?—I got a second dinner for it, I got a lunch for it; but there was a man that was employed to look over the cribs, and do all that, named Hare Hart, and he is the man that employed the patients to do that work.

Did you ever write or receive letters?—No; we could not get a letter out; if I could have written to my master, I could have got out sooner than I did.

Did you ever try?—We durst not send a letter out.

Did you ever try?—I have written a letter, but it was impossible to get it to your friends, because Mr. Bernard stands by you all the time, and if he saw it, he would take it from you.

Sabbati, 23^o die Junii, 1827.

ROBERT GORDON, ESQUIRE,

IN THE CHAIR.

John Hall, Esquire, again called in; and further Examined.

THE Committee wish to ask you whether you persevere in the statement you have already made to the Committee of the state of the infirmary when you and Mr. Birdwood visited it?—Most assuredly; I have not the least reason to alter my opinion.

You assert that that infirmary was in so disgusting a state, that it was with difficulty that you could draw your breath in it?—Certainly.

As there has been some evidence to contradict that statement, will you have the goodness more particularly to state the condition in which you found that infirmary?—All I can mention is the effect it had upon me; it was so excessively disagreeable from the stench, that I could not bear to enter the room.

Do you suppose that that might not have arisen from the state of the patients having been neglected for a few hours or for a day, or do you think it arose from the room not having been cleaned out for a great length of time?—I should suppose that it arose from neglect; the reason I supposed so was this, upon a subsequent

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visit of Mr. Birdwood, in company with Colonel Clitheroe, the room was found comparatively sweet and clean; it is to be supposed that with that description of patients there will always be a certain degree of offensive smell.

Then you mean to say that the stench of that room could hardly have arisen from any circumstances which took place before you came, but that it must have been from habitual neglect?—From neglect upon that occasion.

Did the appearance of the room strike you as being that of habitual neglect or of those accidental circumstances which do happen even in the best regulated infirmaries?—It certainly implied neglect; the impression upon my mind was then and is still that the stench arose from the dirty state of the patients as well as of the room; I have been in the habit of visiting workhouses and hospitals a good deal, but I never witnessed any thing equal to that.

Did you not once go to visit a patient in a dying state?—Yes, I did.

Did you see that patient in a dying state in the infirmary?—Not in the infirmary.

Where did you see that patient?—I saw him in a small room which communicates with one of their sleeping rooms.

Did you believe that that patient was removed into that room purposely for your visit?—I did.

What reason had you to believe that that was not the usual sleeping room of the patient, but that he was so removed in order to be shown to you?—There was no appearance of a sick room or even of a sick bed; every thing was remarkably clean, there were no medicine bottles, I did not see a utensil of any sort there.

Did any delay arise before you saw that patient?—It was on the same day that I visited the infirmary in company with the Reverend Mr. Birdwood, and this was the last patient that we saw upon that occasion; we had a written list of all our patients, and we of course asked for that person whose name was John Cummins, and we were not taken to him till we had gone over the house.

Did you ask to see him when you first went in?—Not when we first went in, but in the course of visiting.

Did a considerable time elapse between your asking to see John Cummins and your actually seeing him?—That I am not aware of, but we had been in the house above an hour before we saw him.

Do you suppose that the keepers were aware it was your intention to see him?—Certainly, because they saw that we consulted our list and saw each patient.

Then your impression is, that this man was removed in a dying state from the infirmary and brought into that room for you to see?—It was the impression on my mind, and it was the impression of Mr. Birdwood also, and that was confirmed by what appeared upon entering the house; in the hall we saw two or three parties, the friends of this Cummins, who were coming to see him; and after we had seen him and had been in the house upwards of an hour, upon our going out, the friends had not seen him, they were still waiting in the entrance hall.

Can you give any account of the number of keepers you have ever seen in your various visits to the establishment employed about the pauper lunatics?—I have asked the question, and I have generally understood that in the yard in which our patients were placed there were two keepers.

Was that yard open to all the pauper patients of Middlesex?—There were a vast many in the yard, I rather think all the male pauper patients.

During your frequent inspections of that house, you never knew of more than two regular keepers in attendance?—I have always understood that there were two keepers to take care of the men, and two only.

Had you any reason to believe, from your inspection of that establishment, that convalescent patients were employed, not only as general assistant keepers, but that some of the convalescent patients were generally employed as crib-room men?—I was not aware of that; when I say keepers, I mean the keepers that we saw in the day rooms and in the yard; there might have been other persons employed at different hours in the dormitories.

What was the date of the visit upon which you saw Cummins?—I do not recollect the day.

Do you recollect the month?—The month of August, and I know the day that he died; he died the 28th of August.

Was it in the latter end of August 1826?—Yes; I beg to explain, that when we went to see the dying patient I have mentioned, the small room in which he was, was locked, and the keeper unlocked the door of the room to let us in, and there was no person in the room but that patient.

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William Barnard, called in ; and Examined.*William Barnard.*

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WHAT are you?—I am one of the servants at the White House, Bethnal Green.

How long have you been there?—I have been there eight years or upwards.

Is it your particular business to attend the male pauper lunatics?—Yes.

Who attends with you?—There is Thomas Dolby, James Essex, Samuel Painter, and Charles Beech.

How long have Beech and Painter been servants in the establishment?—Beech, I believe, has been upwards of three months, and Painter not quite so long.

Whom had you in your establishment, in the room of Painter and Beech, at Christmas last?—There was one of the name of Sharpe, and we had not another ; there were four of us then.

At what time did Sharpe leave your establishment?—I think some little time after Christmas.

Was Essex there at the same time that Sharpe was there?—Yes.

Essex is a lad?—Yes, a stout young man.

What age?—I believe he is getting upon twenty.

At what time did Sharpe leave?—I am not certain what day it was, but I think it was soon after Christmas.

Do you mean to say, that after Sharpe left you, there was not a considerable time when there was nobody in the establishment but you, Dolby and Essex?—Not any considerable time.

You mean to say there was not a space of a month or six weeks before you had any additional keeper?—I believe there was not that space.

Was there a space of two months between the time that Sharpe left you, and any additional keeper being hired?—That I am not positive of.

You must know how that was?—I think it could not be so long.

Will you state when either Painter or Beech were engaged in that establishment?—I think it is about three months, or a little better, since Beech came.

You must be able to state to the Committee, whether from the period that Sharpe left you, you had only Dolby, yourself, and Essex, or how long after Sharpe left you, either of those men were engaged?—I believe it might be a month or six weeks.

Was either of those men engaged before the beginning of March?—I believe not.

Was either of those men engaged till after the intention of removing the Middlesex paupers from that establishment was made known?—I am not positive as to that.

Was Essex living with you before Sharpe came?—To the best of my memory, I think he was.

How long has Essex been with you?—I think he came about last autumn.

Before Essex came, whom had you, besides Dolby and you?—There was no other one with us then.

Therefore, before Essex and Sharpe came, that was before last August, there was no other keeper in attendance upon the patients, but you and Dolby?—Me and Dolby, if we wanted assistance, the keepers from the gentlemen's side, or the other servants, would lend us assistance.

You had no other regular keeper before last autumn?—I think either just before or just after.

Then, previous to that period, there was nobody but Dolby and yourself?—No, not for some time.

At this time last year, whom had you, besides you and Dolby?—I believe there was no other at that time.

Then you can give the name of no other regular keeper before last August?—I do not recollect at this present moment, but I could at one period previous.

Did Sharpe originally come to you as a regular keeper, or did not he come there as a servant?—He came there to be a regular keeper, as I understood ; he told me that he came in as a servant, but he was sent in as a regular keeper.

Therefore, previous to last autumn, when Sharpe came, and when Essex came, there was nobody in attendance upon the pauper lunatics, but Dolby and you?—Yes, and Cooper would sometimes assist.

Cooper is a servant?—Yes.

Has not the number of pauper lunatics increased since Christmas?—No.

Has it much diminished?—They have been reduced, because the Mary-le-bone patients have been removed.

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Then in fact, when you had only two keepers, you had more patients than you have now that you have five keepers?—We have had very few more then than we have now, because we have fresh ones coming in.

In fact, having now five keepers, you have fewer patients than you had when you had two keepers?—Than we had at one period.

Are you in the habit of seeing your fellow keepers every day?—Yes.

If individuals were in the house as keepers, you could not avoid seeing them, do you dine together or sup together?—We generally sup together at night, after the business is over, but we keep our own rooms at other periods of the day.

How did you manage when there were only two of you to so many pauper lunatics?—The patients used to assist us.

Could not you trust the convalescent patients with the lunatics as well as you could yourselves?—No, we were always looking after them backwards and forwards.

That is to say, you set them to work in a room to take care of the patients in that room, and then you went to another room?—Yes, and came and unlocked some of them myself.

You set the convalescent patients to get up others?—Yes.

You used the term “looked after them,” do you mean to say you are in the room the whole time?—No, I cannot say that.

Then you have such confidence in the convalescent patients that you would not have the least scruple in leaving them with the other patients?—Certainly not, because if I thought he was an unfit person, I would not allow him to be there.

Sometimes when you had a convalescent patient that you thought a good steady man, you would let him go and undress the crib patients and put them to bed?—Yes.

Sometimes, when you had so many patients in the crib-rooms, did you not give them a little sort of authority by calling them crib-room men?—We used to call him the man that helped at such a number, for instance, No. 7.

To a patient that you thought a steady man you would give a little sort of direction over a crib-room?—Over some of those that he could manage.

With respect to the patient that had the management of No. 7, you allowed him to go in and put the people to bed?—He would put them to bed sometimes.

And would fasten them down?—He would assist in doing that sometimes, but he was never trusted to do that entirely, because they were always examined.

After he had put them to bed and fastened them down, you saw that he had done it properly?—Yes; sometimes he assisted me to lock them down.

Did you not sometimes allow him to lock them down when you were not present?—Sometimes.

Did you give the crib-room man any additional food or pay?—Yes, he had additional food if he wanted it, and they had some tobacco allowed them, and Doctor Warburton or Mr. Jennings would often give them a little silver.

Those that act with that authority?—Those that act in helping.

Are not the most violent patients kept over No. 7?—No, they are kept in the lower room at the bottom of the hall.

Did they get that tobacco and those other things as a sort of remuneration for their assistance?—Yes.

You had about 170 at one time when there were only you and Dolby to manage them?—I think there was another; there were about 170 at the fullest time, but that was but for a short time.

Then if you had 170, and only you and Dolby to help, you were obliged sometimes to have a good deal of assistance from those people?—Of course I had assistance from them.

Did you generally appoint one patient to have a sort of management over each crib-room?—One or two that were steady were appointed to assist and to help.

Then the man that was appointed to No. 7, for instance, as a crib-room man, did not interfere with any other crib-room?—No.

Therefore he had in fact a certain degree of direction over that crib-room?—Yes, so as to help putting it to rights and assist in putting them to bed.

Of course you did not do this without Mr. Jennings being aware of it?—No, Mr. Jennings knew of it, he must have known of it.

Mr. Jennings knew that you did appoint a man to each room?—To assist us, but they were never trusted to have the management.

But they were a sort of under assistants at the different rooms?—Yes.

Do

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Do you remember a man of the name of Webb?—Yes, he was from Mary-le-bone.

Was he one of those you have trusted sometimes in that way?—He has gone to assist me with the patients, and he has gone to assist Dolby.

Was he not called a crib-room man?—No, he was never appointed to have the regular care of a room, he only occasionally would come.

You say that Mr. Warburton sometimes gave those men a little silver?—Yes.

Was it not the practice to put some of those men in their cribs on a Saturday night and to keep them there till Monday morning?—They used to be locked up on a Saturday night; they had their supper served sometimes before they went to bed, and sometimes after, then they were cleansed out on the Sunday morning, and their breakfasts were served; if any of them required broth at eleven o'clock, they had it; and then at dinner-time, they were served again, and the room was attended to; then in the afternoon, towards the evening, they were put to rights again, and if there was dirty straw, it was taken away, and then they had their supper again.

Did it never happen to you to leave a man all day Sunday without taking him up to wash him?—There are some of them so high, that you could not get them up without a great deal of danger, and therefore we used to clean them by shifting the dirty straw out, and some we used to unlock, if they required it.

Were there not a good many patients of that sort, that you used to let stay all Sunday without taking them up?—We did not take them all out, because we could clean them without, and they were in that high state of disorder, that it was dangerous to take them out.

You thought it was better to let them stay all Sunday without washing them?—They were wiped.

At what time did you generally take them up on the Sunday morning?—We used to go in between six and seven o'clock in the morning.

Did you ever allow any person to come in at the time that you were washing and cleaning them?—No.

You cannot bring any body forward that ever was present, and saw you clean them on a Sunday?—I should think my fellow servants could, and I should think that the patients could state that.

Mr. Dunston never saw you clean them on a Sunday?—No.

You do not think that Mr. Dunston ever saw you wash them on a Sunday?—Not in the lower rooms, but when I have been in the infirmary, he may have come in then.

Do you think Mr. Dunston ever saw you wash them in the middle of the day on a Sunday?—Yes, he may have done that, because, if any of them had wounds, I have gone and poulticed and plastered them, and whatever they required, and he may have seen me doing it.

Whom did you confine in that manner from the Saturday to the Monday?—Those that were the most violent, and those that were subject to fits.

Not the crib patients generally?—Those are crib patients and patients that do not attend to the calls of nature.

Then all that were crib patients were confined on a Sunday?—They were every one of them confined, except some that we unlocked a hand to let them eat their victuals with more ease, and some few that we let get up.

But almost all the crib patients were confined from Saturday night till Monday morning?—The greater part.

Who are the crib patients?—They are those that are in a high state of disorder; those that are negligent of the calls of nature, and others that are subject to fits.

Paralytic patients?—There are a few paralytic patients, but very few.

Do you chain the paralytic patients?—If they are irritable, but if not, they are put in a bed in the infirmary.

You say that those that were liable to fits were confined in that way; if a man were seized in a fit in that state, would not he die in his confinement?—No, because the confinement is put on in that manner to prevent doing any harm.

What time were you in the habit of lighting the fire on Monday morning?—At five o'clock, sometimes before, and sometimes between five and six.

You said that you only chained down those whom you could not trust to go out?—Those that were so violent and high, and others that could not attend to the calls of nature, and others that were subject to fits.

Those persons that were so violent and high, were out all the other days in the week, were they not?—They used to be, excepting a case here and there, where they

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were labouring under such excitement, that it was advisable to keep them in bed for a few days together, but then they were confined under restraint, and some individuals were put there, in consequence of being so noisy, and disturbing every body else.

The people that were confined on Sundays, were allowed to go at large all the other days in the week?—Except they were so bad that they were obliged to be kept in bed.

Were they generally higher on Sundays than on other days?—No, but it was considered to be doing them good by giving them a day's rest.

Was that the only reason you had for doing it?—It was.

Were those patients that were confined from Saturday to Monday, confined generally in their beds on other days of the week?—Not generally, excepting there was a case that was extremely high that required it, then it has been used.

Then whether those patients were in that high state or not upon the Saturday, you confined them?—Yes, but they were either dirty, or high, or subject to fits.

But you say they were not higher on Sunday than on any other day, therefore you confined them, whether they were in a high state or not upon the Sunday?—It would not be safe to leave them there without they were under some restraint.

Were there bars to the windows, or any thing by which they might strangle themselves?—There was that guard over them, that they could not have an opportunity of doing it.

Was there any person in the room at night?—Not in those lower rooms.

Then it was merely because they were high, not from any fear of their strangling themselves, or of their hanging themselves, that they were confined?—Some of them were confined there, but then they were confined securely, so that they could not use their hands.

In fact, as they were confined on Sundays, and not on other days of the week, there was not such constant attention given to them during the day as there was on the other days?—The keepers went regularly down to them with their victuals, and were in the room at various periods.

But they were not so regularly present as on other days?—In the week they are out in the sitting rooms, where the keepers are.

Is Mr. Jennings generally present when you are washing those patients in the morning?—He goes round while we are washing.

Every day?—He goes round, I believe, every morning.

On Saturdays?—Yes.

And Sundays?—On Sunday mornings.

In short, every morning of the week?—Every morning he comes into the rooms whilst we are there.

Is he ever absent on a Sunday?—He goes round on a Sunday morning.

Is he ever absent on a Sunday?—He sometimes goes out upon a Sunday.

Does he ever go out without first of all seeing you wash the patients?—He never goes out without coming into the rooms.

Does he visit them every day?—He is in the rooms regularly every day, and sometimes several times in a day.

Supposing that a man who has been confined there within the last five months, states that several times he did not see him for several days together, do you believe that that is true?—It is false; it is his invariable practice, ever since I have been there, to come in almost every morning.

You can state that with regard to the other parts of the Asylum, as well as that part you are in?—Yes; he passes out in one way generally; there is a gate connected with the passage that leads to the women's side, and he goes there; and from that I believe he passes to the ladies side, and I have often met him coming from there after he has been passing through the buildings.

You attend Mr. Dunston when he visits the patients, do not you?—I do.

Invariably?—I am in general with him, except I happen to be engaged in visiting the rooms.

Supposing Mr. Dunston orders medicine, does he give that order to you?—He brings a sheet of paper with him, with the names that he has that are taking medicine, and if he wants to put on any fresh case, he writes the name down, and orders the medicine, and sends that medicine down in the course of the day or the evening to be given.

Does he leave that paper with you, or take it away?—He takes it always with him.

Then

Then how do you know what medicine to administer?—It is directed in the patient's name.

Does he ever order any different diet?—Yes.

To whom does he give that order?—Sometimes to Mr. Jennings or Mrs. Jennings, and sometimes to me.

It is your particular business, when you receive a direction, either from Mr. Dunston, or from Mr. or Mrs. Jennings, to see that the patients are so treated?—Certainly.

Is that put down in writing, or is it merely by word of mouth?—By word of mouth.

Can you state at any distance of time what the particular diet of any patient was within the last six months?—There have been several that have been put upon the nursing list.

Is the nursing list always the same?—It depends upon what is the matter with them; some of them have coffee or tea, and bread and butter for breakfast; and then at eleven o'clock regularly there is good beef tea and mutton broth, of which those that are sick have a portion; then at dinner time they have arrow root, sweetened with loaf or moist sugar, and wine put in it; if requisite, there is brandy put in it.

Are those variations of diet all ordered by word of mouth?—Yes.

Are you able to remember when the doctor goes round and says such a man is to have such a thing so as not to make any mistake?—Yes.

Whatever may be the number?—Yes, but the number of sick patients is never great.

How do you get the sick diet?—In case I want arrow root or sago or tapioca, I go into the parlour, and I ask either Mr. or Mrs. Jennings, or Miss Coulson, or Mr. Edward Jennings for it, and they give it me out of the closet, I then take it and make it.

Who makes it?—If it is sago or arrow root, we make it ourselves; I frequently make it, and then we take it into the parlour, and we ask for whatever it is to be, either red wine or white wine or brandy, and that is given and the sugar.

Does not it take a considerable time to make it?—Arrow root is very easily made.

When you have got those things delivered out to you, is there any memorandum kept of such things having been given to you?—I am not aware that there is an entry made of it, but I would refer to Mr. Jennings for that.

Did it ever happen to you to make an application for those things and to have it refused?—Never, but whenever I have gone in and stated that a patient has been taken unwell that master has not seen, if I have gone and said so and so is taken unwell and seems as if he wants something, then they say, "what do you think you had better give him?" if I ask for wine or a little warm spirits and water, I have it, and it is taken to him directly.

Is any observation made how much you want?—They ask who it is for, and it is stated who it is for, and of course as master goes round upon the men's side and mistress upon the women's side, they know who are the sick patients.

There is no account kept of the sick diet when it is issued in the manner you describe?—I do not know whether they make a minute or not.

Can you state what was the diet of a man of the name of Ferguson, who died in April?—Yes; that man used to have bread and butter or toast and coffee for breakfast; after he was unwell, he had beef tea at eleven o'clock, and he had light pudding for dinner.

Who made it?—That is made by the cook in the house; he has had arrow root with wine, he has had sago with wine, and he has also had meat occasionally when he has asked for it.

When did that sick diet begin with regard to Ferguson?—It began as soon as we found he stood in need of it.

When was that?—It was when he was so unwell as that he was taking medicine.

What was the date of that?—I conceive it must have been some time in March; that was the diet he had, excepting when he wished to have meat or other things, because he was a man subject to fits, and sometimes he would not be satisfied with that sort of diet.

How many people were there in the kitchen?—There are two, one that attends at the gate and assists in cutting up bread and cheese, and there is one that is the regular cook.

Has the cook any assistants?—There is a house-maid, and there is another that assists in making such things as puddings, and any thing of that kind.

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Then you can state positively, that Ferguson had that sort of diet from the time he was taken ill?—I can positively assert it.

Have you had any conversation lately with either Dr. Warburton or Mr. Jennings, upon the subject of the sick diet?—They have asked me if I recollected what I had given them.

Have you had any conversation with either of those individuals upon the subject of the number of keepers?—No.

Have you had any conversation with either of those individuals upon the subject of the evidence they had given, or the evidence you were to give here, excepting as to the subject of that diet?—No; they told me to tell what I knew.

Did they say upon what subject?—Upon the whole of the things, to answer the questions which were put to me.

Then, if you have been stating exactly the reverse of what Mr. Jennings has stated, you still adhere to the statement?—I believe I have stated the truth.

If you have said one thing and Mr. Jennings has said another, do you maintain that what you have said is true?—Yes; I am not aware that I have fluctuated from the truth at all.

Do you wash the crib patients regularly every Sunday morning?—We used to clean them out, and some we used to take up and wash; but there were some that we did not.

Did you take them out of their cribs and wash them down?—I do not say that we take them all out, but some we do.

How many have you ever taken out upon a Sunday morning to wash?—I have taken out several, but I cannot say the number.

How many crib patients are there altogether?—I think it is about thirty.

Are there forty?—There are not forty.

Before last Christmas, when you had not so many keepers as you have now, how many of those have you ever taken out to wash on a Sunday morning?—We have had several out on a Sunday morning.

Did you ever take three out?—Yes, I have; we have taken three out, and more.

You think then, that out of the thirty or forty crib patients before last Christmas, you were in the habit of taking two or three out on a Sunday morning?—We have taken out more than that, but there were some that did not require to be taken out.

Did you ever take five out on a Sunday morning to wash them?—That I will not be positive of.

Did it not happen on some Sundays that you did not take any out?—No, I do not believe that ever happened.

How many crib patients have you had at a time?—I do not recollect.

Have you ever had fifty?—I should think not fifty.

Upwards of forty?—Upwards of forty.

How many of those were chained down from the Saturday to the Monday?—All of them were confined on the Sunday, except some few that we get up.

Before Christmas last, how many of those crib patients do you ever recollect to have taken up on a Sunday morning?—I have taken up several.

Have you ever taken up two?—I am certain I have.

On the Monday you took them all up and washed them?—Yes.

How did you wash them?—The general mode of washing them is with a flannel, in warm water in cold weather, and in cold water in hot weather; and sometimes, when they were very dirty, a mop has been used to take part off, but a flannel was generally used; for my own part, I never used a mop three times in my life, but I have used it upon one or two occasions.

Have you seen a mop used?—I have seen it used occasionally, but never as a regular thing.

But generally when the patients were taken up on a Sunday morning, some of them were in such a state that a mop has been used?—Yes.

What quantity of flannel have you ever had in the establishment?—The flannels that we used were parts of blankets that were torn up that were kept clean for the purpose.

Do you call part of a blanket that is so old that it can no longer be used a flannel?—I always thought that blankets were flannels.

Did you ever use what is usually called flannel?—Yes, I have used that too.

What quantity of it did you ever get?—Old flannels of course are what we use for that purpose, old flannel waistcoats and those things.

Did

Did Mr. Jennings ever see any person use a mop upon those occasions?—I believe never; I am not aware that he did.

Do you mean to say that you did it against his desire?—It was never intended to be used as a regular thing.

Do you mean to say that you have had his directions not to use a mop at the establishment, and yet that you have used it?—I do not mean to say that.

Do you mean that you did it against Mr. Jennings's desire?—Mr. Jennings never desired it, but that was the practice that was adopted with some very high patients.

Do you mean that you have had no conversation with Mr. Jennings or with Mr. Warburton, with respect to stating that the people were washed down with flannels?—I have been asked about a mop, whether I was in the constant habit of using it, and I said I never was.

Have you not been asked, with reference to the system of washing down persons with flannel?—Yes, I was asked that question, and I told them which way I did it.

Have you had any communication with them upon the subject of the evidence you are now giving with regard to rubbing them down with flannels?—No, it was what I invariably did before I was asked a question about it.

When were you asked those questions?—I was asked some a long while back, I cannot say how long back.

On Monday mornings, when you have gone into the room, have you not often found them lying upon their cribs naked?—They have their blankets and rugs.

Have not you found frequently on the Monday morning, that from their confinement, or from what has occurred during it, the room is extremely disagreeable?—Of course, there must be expected to be some little offensiveness about it.

Will you state that there was not such a violent effluvia, that you could hardly breathe in it?—No, there was not.

Did you know a patient of the name of Nettle?—Yes.

Did you ever know that he was taken ill whilst he was cleaning some windows in the infirmary?—I do not recollect the circumstance, I know that he was unwell part of the time he was there, and I know he had medicine, and I also recollect he had gruel and broth, and some other things.

You are not aware that he ever was sick from having been in the infirmary?—I know that he has been unwell, but I was not aware he was taken unwell in the infirmary.

Was he under your particular care?—He was under mine and my fellow keeper's care; we all act together.

Whose business is it to attend particularly to the infirmary?—I superintend it, and Painter is in the infirmary.

Was that infirmary in the same state in last September as it was in August last; was it not cleansed between the latter end of August, and the middle of September?—Our rule is to whitewash the house regularly once a year, and the infirmary and straw rooms are done sometimes twice, and sometimes three times a year.

Was not the whitewashing begun rather unexpectedly upon that occasion?—No.

You are quite certain of that?—Yes; we always have those places done, and there are many bed-rooms up stairs, which, if they are found dirty, are cleaned too.

Was Nettle employed to clean the windows about the house?—I believe he used to assist occasionally.

He was an active sort of man?—He was the latter part of his time.

Were you ever in the infirmary with Mr. Hall, in August last?—I was.

What state was it in at that time?—It was on a Monday morning, it is always worse on a Monday morning.

Why is that?—Because we always shave on a Monday morning, and we used to get the straw patients up, and there was one patient who had dirtied himself in the four bedded room in the infirmary, who had just been washed, and in the other room there were several bad patients.

Then you mean to say that those rooms happened to be in a very bad state upon that occasion?—I mean that they had not been cleaned up so clean as they would have been if it had been a little later.

Then the infirmary was very offensive that morning?—There was a smell coming from that cause, but it was not very offensive; there was more offence just at that time, because of the washing of that person, and there being several bad patients there, and one I know had just been washed.

Do you take upon yourself to say that that infirmary is generally as clean as the circumstances will admit?—Yes.

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Do you know a patient of the name of Cummins?—I do.

What became of him?—He died.

Were you present when Mr. Hall and Mr. Birdwood saw him a few days before his death?—I was.

In what room was he then?—I saw him in a separate bed-room.

Was that the room he was in before they came to the house on that day?—He was removed there in consequence of his wife and sister coming to see him, because we could not take the females into the infirmary amongst those patients.

Did you tell Mr. Hall at the time that that was the case?—I do not think I did; I do not think that question was asked me.

Did Mr. Hall see him before his wife and children saw him, or did he see him after?—I think after his wife and children saw him, but I will not be positive.

Where was he when he died?—He died in that room.

Do you mean to say, that from the time of Mr. Hall seeing him in that room to the time of his death, he was not removed from that apartment?—I think not, but I really cannot be positive.

You recollect all but that point?—I recollect all but that point; I cannot be certain whether he died in that room or not.

How long did he live after the visit of Mr. Hall?—I cannot recollect when he died, I do not recollect as to that.

Was any inquiry made about him after his death?—That I do not recollect.

How many deaths upon an average take place in a year in Mr. Warburton's establishment?—But few; I never heard the number.

Is there no list kept of the deaths?—Master keeps an account of how many die; he writes of course to the parish officers or the relatives of the individual.

Do fifty people die there in the course of a year?—I should think not, but I cannot tell the number, I should think master could tell.

Do you call your master Mr. Warburton or Mr. Jennings?—Mr. Jennings I generally call master.

*Mr. Thomas Jennings, again called in; and further Examined.**Mr.
Thomas Jennings.*

HAVE you full confidence in the veracity of the last witness, William Barnard?—I have.

You believe him to speak the truth?—I do.

Will you now have the goodness to state to the Committee whether you maintain the truth of all those statements which you made to the Committee upon a former day, or whether upon reflection you are inclined to withdraw or alter any of those statements that you made?—I do maintain the truth of them.

You stated in your evidence that you had five regular keepers in addition to Thomas Cooper, who acts as occasional keeper?—I did.

You were then asked, "How long have you had five regular keepers?" you said, "we have always had five?"—We have, I believe; I stated that I could not charge my mind conscientiously whether we had four or five keepers at Christmas.

In your former evidence you said, "Sometimes we discharge a servant and cannot get another for a week or a few days;" you were then asked, "How many had you at Christmas last? I believe the same number.—Regular servants? Yes, I think so.—Direct yourself to how many you had at Christmas last? We had three, and those we have now; one has gone away since; I am not sure whether we had four or five." Do you mean again to assert to the Committee that you had at Christmas last four if not five regular keepers?—I do.

Will you then give to the Committee the name of any individual whom you had as a keeper, in addition to Barnard, Dolby, and Essex?—Sharp, I believe.

Do not you know that Sharp had left your establishment before Christmas?—I am not certain whether it was before or after.

If Sharp was not with you at Christmas last, whom else had you?—I believe we had Beech.

When did Beech come to you?—Before Christmas, I believe.

If Barnard has stated that Beech and Painter did not come before Christmas, either you or Barnard must be in an error?—I have no book to refer to.

You must know when Beech and Painter came to you?—Painter did not come before Christmas, but the impression upon my mind was that Beech was with me before Christmas long.

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Did not Sharp and Essex come to you about August or September in last year?—I believe they might.

Before Sharp and Essex came to you, Barnard and Dolby were your two keepers?—They were two of them.

Whom had you besides Dolby and Barnard?—I do not recollect it, but we had five.

Do you mean to say that you cannot give the name of any other individual who was with you as keeper before Essex or Sharp came to you?—I do not recollect the name now, but I dare say I shall.

You stated here that you always had five keepers?—That has been considered our number.

And yet previous to last August, when those inquiries took place, before Sharp and Essex came to you, you cannot state the name of any individual who was your keeper in addition to Dolby and Barnard?—I think we had one of the name of Ingram.

When was that?—He is removed; he is now on the gentlemen's side.

You have stated that your custom was to have five regular keepers, and now in point of fact it appears that previous to last August you had only two, Dolby and Barnard; in August last, you had Sharp for a short time and Essex for a short time; and after Sharp left you at Christmas, you had only Dolby and Barnard till March, when you had Painter and Beech, is not that statement correct?—The impression upon my mind is that Beech came before Christmas considerably.

You must know how the fact is?—I cannot tell, for I do not keep a book to enter it in.

Do not you pay those men wages?—I pay them quarterly.

You must know when Beech came to you, and the time when you commenced paying him?—I paid him last quarter, and the impression upon my mind is, that I paid him the quarter before.

Cannot you tell when Beech came?—I cannot.

You acknowledge that Sharp and Essex both came about last August, can you state any body that you had for a twelvemonth before, that could make up the number of five?—I think a man of the name of Ingram was with me.

Supposing he was with you, that only makes three; how do you account for the statement you made, that you had five?—I should suppose that there were some discharged, and that I had them again.

At what period, previous to the first of August in last year, did you ever have five keepers?—I should think we always had five, unless we discharged one keeper by accident, and have not hired another immediately.

You pay the wages quarterly, and you hire the people yourself?—I do.

Do you mean to say, that you have no account of any of the times at which those keepers came to you?—None whatever.

Have you any book of accounts of any description in the establishment?—It is always my rule to send for the servants the first Saturday night after quarter day, and pay each servant.

How do you know when it is quarter day, if you do not know at what period they came?—I know when the quarter day is, and I know the first Saturday after quarter day.

Have you any account book of any of your expenditure, with regard to that Pauper Lunatic Asylum, that you ever show to Mr. Warburton?—Not of the paupers alone, we have an account of the whole establishment.

Do not you enter wages so much?—Yes.

Then, by looking back to that book, you could ascertain how many keepers you had upon the establishment at any time?—I dare say I could, by dividing the wages.

You cannot now, from memory, give the Committee the name of any third keeper that you had except Ingram, for a short time before you had Sharp and Essex?—I cannot at present.

How long was Sharp with you?—I do not know; I suppose five or six months.

Do you know for what purpose Sharp originally came?—He came to be a servant.

Did the Committee rightly understand you to say that the keepers never met together in the day?—In the night time they come, from about nine o'clock till ten they are in the kitchen, and at ten o'clock the kitchen is cleared, and they all go to bed.

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Thomas Jennings.

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In short, they sup together?—No, they sup in their rooms, that is, those that choose.

If any one of the keepers was to say, that he never saw but two others in that room, does he speak upon a subject with which he is not well acquainted?—I should think not, there might be five, or there might be seven, and another servant not to know it.

Though it is the habit of the keepers to meet at that place every evening, you mean to say that one keeper might be there, and not know the other six, if there were seven of them?—Decidedly so.

Although they sup together every night?—They do not sup together.

Is it possible that there should be five keepers, and Barnard not know it?—I should think not.

You mean to say, that the keepers do not sup regularly in the kitchen every night together?—They do not all meet together to sup in the kitchen; they may sup in their rooms, if they choose.

Is it not the fact that the keepers do sup together every night in the kitchen?—I know that they do not.

Do they generally?—I do not know that they do.

Supposing Barnard should have stated that it is the regular custom of the keepers every night to meet for supper in the kitchen, what answer would you make to that?—I am not aware that it is the case, whether they do sup or do not sup in the kitchen I cannot tell; after nine o'clock, they have that hour to themselves.

You must know the fact, whether the keepers do or do not meet together to sup in the kitchen?—I do not.

Did you not say that you always go into the kitchen just before ten o'clock, to see that the house is all quiet?—I do not go into the kitchen every night, but the servant that belongs to the kitchen, clears the kitchen.

Then you never go into the kitchen at that time to see that it is all right?—I do not constantly go into the kitchen to send the servants to bed; what I stated was this, that the servants leave the kitchen every night to a minute at ten o'clock.

How do you know that fact?—Because I am in the parlour, and sometimes I go occasionally into the kitchen.

How can you know what is going on in the kitchen when you are in the parlour?—The parlour is close to the kitchen, and therefore I can hear when the servants get up to go to bed.

Cannot you hear when the servants come together for supper?—I can hear some there, but I cannot tell whether they are all there.

With regard to the sick diet, arrow root, and those sort of things, in case any person is sick in the house and requires that arrow root, who prepares it for them?—Generally the servants; for the males, Mr. William Barnard or Thomas Dolby.

You mean that they go and get the arrow root and the sago, and they themselves prepare it?—They come into the parlour or rather the store-room, and get a quantity of arrow root, enough to make the number of basins they want; that is made in the kitchen, and put into basins and brought in, and wine or sugar or whatever is necessary put into it.

You stated that five was considered the number of attendants to the male pauper lunatics, upon what principle was that number fixed, was it as being the number that was actually indispensably necessary?—It was thought sufficient to take charge of the male paupers.

Was it considered as more than sufficient, or as sufficient?—As sufficient; I might say it was considered as more than sufficient, and particularly when a convalescent patient was there who chose to assist.

In case it was reduced to nearly one half of that number, should you still consider it to be sufficient?—No, I should hire another as soon as I could get one.

Would a diminution of the number to three or two derange the internal economy of the establishment, and produce inconveniences both to the patients and to the other attendants?—I am not aware that it would produce any inconvenience, but we would rather employ servants than patients.

Do you think the establishment could be as well carried on with two attendants or with three as with five?—No, I should sooner have five servants and not allow the patients to make themselves useful at all, than to employ patients occasionally.

Do you maintain your former statement to the Committee, that on a Sunday morning all the crib patients were taken up to be washed and cleaned?—I do, unless

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Thomas Jennings.

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unless the patient was in that dreadfully violent state that it was impossible to take him up.

Supposing there were upon an average from thirty to forty crib patients, how many do you suppose there were that were left in their cribs?—Many Sundays, not one, they were every one changed.

That you saw?—That I saw; I cannot say that I saw every patient done, but I went round and saw that they were done, and I was satisfied that they were done.

Did you see them taken out of their cribs and washed?—I saw them myself scores and scores of times.

Supposing there were forty crib patients confined on a Sunday, you maintain that they were all taken up with the exception of two or three?—I do.

Then supposing Barnard should have said, that so far from that being the case, out of forty crib patients he cannot positively undertake to say to this Committee that more than two or three, or at the utmost five, were ever taken out of their cribs to be washed on a Sunday morning, how will you reconcile that statement with your's?—I do not think that Barnard could make such a statement.

If he did, it is not true?—I should think not.

Mr. Peregrine Fernandez, called in; and Examined.

WHAT are you?—A surgeon.

By whose desire do you attend here?—By Mr. Warburton's desire.

What statement do you wish to make to the Committee?—That I have examined the lunatics constantly at Mr. Warburton's, and have made regular reports to our Board.

For what Board do you attend?—The Saint Andrew's, Holborn, and Saint George the Martyr parishes; I can put in, if the Committee please, a book containing some of those reports, begging the Committee to understand that our Board is a mixed body, that occasionally they take away my reports, and I lose them, but they are still regularly made, and I have been in the habit of making them constantly six times a year for years.

Are you in the habit of visiting the patients in Mr. Warburton's establishment?—I have visited them in the morning early, at noon, and as late as six o'clock in the evening.

What is the general result of your visitations?—The general result, as I have seen it, going straight into the asylum, not waiting for any introduction, is that they are cleaner than lunatics are in the parish workhouse, that their clothes are in better order than they are at the parish workhouse, and that they are better fed than at the parish workhouse, because the Committee will find in one of these notes, one of them tells me, having recovered, that he has been allowed to sell his surplus food; I have not depended upon my own observations, but I have inquired of three or four recovered lunatics that have come from thence how they were treated, and what the general circumstances of management were; in the case of bruises, for example, which I consider important with respect to lunatics; whenever a lunatic has been bruised, my method of examining him would be this, the keeper would be put out of the room, if the lunatic gave an account of the bruise to me, and said it was inflicted by somebody else, I should put the lunatic out of the room, and call the keeper, and make an examination of him; all this I have done repeatedly, and I have not, in any one instance that I can remember, seen an individual who has been bruised in any attempt to coerce him.

You say you visit the establishment six times a year?—And twice with the overseers.

How much time do you give to those visitations?—Generally from an hour to an hour and a half.

How many patients have you in that establishment belonging to your parish?—From sixteen to twenty-two, but then I do not rely upon my opinion of those patients, because those patients might be got ready for me; but when I am in the habit of passing through the lunatic asylum, I make it a point to converse with the other patients, and to stay a considerable time in the wards, looking about me to see how matters are, and as far as I go, I should say that I always found the place extremely cleanly, and that I should consider, upon the whole, that a lunatic is as well taken care of as a pauper; now, for example, at our workhouse, they have meat four times a week; I have made inquiries, and I think at Mr. Warburton's they have it six times a week.

Mr.
P. Fernandez.

Mr.
P. Fernandez.

23 June 1827.

Do you consider that an inspection of one hour or an hour and a half eight times a year authorizes you to make this general statement as to the condition of the establishment; do you consider that that is sufficient time for you not only minutely to examine into the condition of the twenty-two patients under your especial care, by sending the keeper out of the room and the whole process you have described, but also to examine into the general condition of the other pauper patients?—Yes.

You have stated that such is the abundance of food in Mr. Warburton's establishment, that one of the pauper patients was enabled, out of his own portion, to sell some, to whom did he sell it?—I did not inquire.

Do you conceive that it is a good thing in any asylum of that kind, where patients are suffering from bodily as well as mental malady, that they should be allowed to sell their food; does not a suspicion arise in your mind that he might have sold that food to a patient?—It does not appear to me to be open to any objection.

Then you would not be dissatisfied at one of your pauper patients buying the surplus food of another patient?—Certainly not, because if he bought it, it would imply that he had an appetite to eat it, and I do not consider that the circumstance of a person being a lunatic necessarily implies a bad state of bodily health.

Have you turned your attention much to the disease of the mind?—I have always every year a certain number of patients under my care in that respect.

Having a certain number of patients afflicted with that malady under your care, have you or not ever attended to diet as an essential point?—Certainly.

You think that eating too much, or eating too little, might be of injurious consequence?—Certainly, when a patient is ill, not otherwise.

Did you ever go there on a Sunday?—Never; I have inspected them at regular periods.

Were those visits on any particular days?—I have never kept the exact day, being desirous of going without any preparation.

Have your visits generally taken place about the same time?—Yes, within a few days.

Were you ever in the infirmary?—Yes, I have been.

Do you consider the infirmary at Mr. Warburton's establishment to be wholesome, clean and well regulated?—Whenever I have seen it, it has been wholesome and clean.

And you have always seen the patients in that establishment?—I have; I have never seen above two or three in the infirmary.

Have you ever visited the patients upon Saturdays and Sundays?—I have upon Saturdays.

Are you aware of their treatment upon a Sunday?—I know nothing of their treatment on Sunday, not being there.

Alexander Frampton, M. D. called in; and Examined.

Dr.
A. Frampton.

YOU are one of the visitors appointed by the College of Physicians?—I am for the present year.

How long have you been a visitor?—One year only; they are appointed annually.

Is this the first year that you have been a visitor?—No; I have several times been a commissioner.

At whose instance have you attended to-day?—By the request of Doctor Warburton.

Will you have the goodness to offer to the Committee any statement you may think it right to make?—I have only to reply to any questions which the Committee may ask me.

What is your general opinion of the state of Mr. Warburton's houses?—My general opinion is, that they are most excellently regulated; that they are, upon the whole, very clean and very well attended to in all respects, as far as I had an opportunity of observing.

Have you ever visited the infirmary at those establishments?—Not particularly.

Did you ever visit the rooms called the infirmary, at the White House at Bethnal Green?—I do not know that I have particularly.

Then you cannot give any information to the Committee as to the state of that infirmary?—No, I cannot; whether I have seen the infirmary or no I do not know, we make a point of visiting every apartment in the house.

Have you ever visited all the crib-rooms?—Constantly.

What

What means had you of ascertaining whether you had seen every room in that establishment?—We have hunted out every possible place, and I have not the slightest reason to doubt but that we have seen every part.

Have you ever been at Bethlem?—Not to New Bethlem.

Comparing Mr. Warburton's establishment with the other establishments for the reception of paupers, are the Committee to understand that it is a very good and well regulated establishment?—I think it a very good and well regulated establishment, in comparison with any other.

Therefore the Committee take no unfavourable specimen of those pauper establishments in examining Mr. Warburton's establishment?—It is very numerous, and perhaps more crowded than any other; at present it is far more numerous than any other establishment.

The Committee find it hinted in the Report, that the commissioners have turned their attention to the crowded state of the establishment; have you any thing to state to the Committee with regard to the establishment being insufficient for the number of patients admitted?—The commissioners have occasionally recommended an enlargement of the premises, and considerable enlargements have been made within my recollection.

With regard to the deficiency of ventilation, has it ever fallen to your duty to make remonstrances upon the subject of ventilation?—It is always a point we particularly attend to; if we have had occasion to remonstrate it is noticed in our Report.

The Committee understand you to state, that compared with other pauper establishments you did not consider Mr. Warburton's to be very much above par?—Not much above par.

Do you consider Mr. Warburton's as a favourable specimen of those establishments?—I think there are some circumstances in the White House that are unfavourable; the house is not so good a house as some others are, but I think upon the whole it is a very well regulated house.

You consider the management and regulation very good?—I am sure it is; but I would be understood to speak more particularly of a distant time, when I had more intercourse with the house than I have had of late.

About what year might that be?—Some eight or ten or twelve years back perhaps.

In your opinion, it is a very good house?—It is.

Have you ever been in a crib-room in which there was a window without glass?—Yes, I dare say I have; I was yesterday in many crib-rooms without glass.

At Mr. Warburton's?—No; we made another visitation yesterday.

Where did you go to?—We went to the three houses at Battersea, Larkhall Lane, Clapham, Tooting and Peckham.

Have you observed a room without glass at Mr. Warburton's?—I have no doubt I have, because it is usual; I have no doubt I have seen all the rooms in the establishment.

You do not consider that circumstance any objection to the establishment?—No.

Have you ever seen any county lunatic asylum?—I have not.

Have you ever turned your attention to the cure of lunatics?—I have had a great deal to do with lunatics.

You have not thought it part of your duty as one of the commissioners of inspection either to examine New Bedlam or to examine any lunatic asylum in order to form a comparative view of the treatment at Mr. Warburton's and those other establishments near London?—I have not examined any of those asylums.

How many visitations do you make to each lunatic asylum in the course of a year?—Seldom more than one, excepting to those large establishments.

Are the Committee to understand that your opinion of Mr. Warburton's establishment is formed upon that annual visit?—Yes.

How long does that annual visit generally last?—Several hours.

When you speak of Mr. Warburton's establishment being well regulated, you speak from having seen it once a year?—We have generally seen it twice a year, we have seen it twice this year.

Do they never know when you are going there?—Never.

Mr. *John Main*, called in; and Examined.

Mr.
John Main.

23 June 1827.

AT whose instance do you attend here to day?—I cannot tell; I was summoned here on Monday, and a message was left at my house last night to attend here to day, but by whom it was left I can hardly say.

You are one of the directors of the poor of the parish of Saint Pancras?—Yes; and I have been so about eight years.

In that capacity have you had an opportunity of knowing the treatment that the pauper lunatics of that parish have received in Mr. Warburton's establishment at Bethnal Green?—I have been in the habit of visiting the pauper lunatics sometimes twice and three times a year, and the observations that I have made from time to time have always been very satisfactory to me.

Who is the surgeon that visits the pauper lunatics on the part of the parish of Saint Pancras?—The first part of the time that I visited, Mr. Matthias was the surgeon and Mr. Hopham was the parish apothecary; but they are both dead within the last five years; Mr. Dillon has been the surgeon apothecary.

How often is he expected by the parish to visit those patients?—Very frequently; but there is no limited number of times for him to visit, I believe he visits them upon the average once in three weeks.

Do the directors of the poor feel it their duty to make inquiry of Mr. Dillon whether he has so visited them?—Mr. Dillon goes when it is convenient for him, and he is expected to say that he has been there, to give his report upon the state of the patients.

To whom does he report the opinion he forms upon his visitation?—To the committee for general purposes; there is a vestry, and they appoint a committee for general purposes to manage every thing, and I am one of that committee.

Then the Committee are to understand that every one of those reports made by Mr. Dillon upon that subject has been submitted to you as one of that committee?—They have always been verbal reports; there has been no written report only when the board of directors go with the surgeon.

Therefore any observations that Mr. Dillon has submitted to the parish of Saint Pancras you have been acquainted with?—Certainly.

Has he ever called your attention to any case that has required different treatment from that which has been practised?—Never to my recollection.

Did he ever state to the committee of which you are a member, that improper treatment was practised towards the pauper lunatics in Mr. Warburton's establishment?—I have always understood that he was satisfied with the treatment that the pauper lunatics had there, that has been the general understanding up to within these very few months.

And you take upon yourself to say that you felt perfectly satisfied with the treatment of the pauper lunatics at Mr. Warburton's establishment, in consequence not only of your own observation, but of the reports that Mr. Dillon has made to you?—Perfectly satisfied; if it had been otherwise Mr. Dillon would have had orders to make a special report upon any special case.

You have always understood that proper medical treatment was afforded those patients?—We always depended upon him for that, and if any particular treatment was necessary he communicated with the resident apothecary at the establishment; he has mentioned that such a patient was very poorly at his last visitation, and the general order has been, under such circumstances, for him to visit again as soon as convenient, and to see how the patient was.

Do you recollect any thing of the case of a man of the name of John Blacklock, a schoolmaster in Kentish Town?—Very well.

Can you state the circumstances of that case after he was sent to Mr. Warburton's establishment?—I cannot tell exactly what they were.

How was he treated there?—I cannot say, he was in such a bad bodily state, that I should suppose he was confined principally to his bed, or to the infirmary.

Did Mr. Dillon represent to the directors of the poor that the infirmary in which he found him was in an improper state?—Never.

Did you ever accompany Mr. Dillon into the infirmary of that establishment?—No, I never saw the infirmary; if we had any patients in the infirmary, I should have thought it my duty to have gone there; but I do not recollect being there when any one of our lunatic poor was confined in the infirmary.

Did not you go to the infirmary with Mr. Dillon?—Never; I never knew which

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was the infirmary; I have heard Mr. Dillon frequently say, that it was only in the early part of this year that he himself had seen the infirmary.

Did you not go up by a step ladder into it?—I believe that is the way into it, but I never was in the infirmary; I have looked in at the window, it is a window from the stairs, but I never was in the infirmary.

Had you any representation from Mr. Dillon about the case of a man of the name of Ferguson, who died in Mr. Warburton's establishment?—No; Mr. Dillon had been to see the patients, and upon the next meeting of the committee, he said that Ferguson was very ill, and he hardly expected to see him alive again; Ferguson was always in a bad way.

Then you relied entirely upon Mr. Dillon for the good or bad management of those pauper lunatics?—We always considered that Mr. Dillon was responsible to make any complaint, if there was any to be made.

How many times a year do you go to see this establishment?—I believe very seldom more than twice; I have been twice this year already.

Did you see the whole of the establishment when you went there?—I believe completely.

When you went to see that establishment, what did you see?—I never understood that there was any restraint.

Did you go over the whole establishment?—Certainly.

How came you not to see the infirmary?—I should have seen the infirmary if there had been a patient belonging to the parish of Saint Pancras; I should have thought it my duty to have seen that patient.

Did you go merely to see the paupers of the parish of Pancras, or did you see all the rooms in the house?—I believe we saw all the rooms in the house.

Then how is it that you never saw the infirmary?—I do not say that I never saw the infirmary, but that I never was in the infirmary; I saw it when I passed.

What do you mean by seeing a room?—If I pass a window and see a room, I say that I see the room; I saw that there were beds in the room.

Supposing you received any complaints from any of the friends of the pauper lunatics, of the ill usage of any lunatic in the house, what is your mode of investigating that charge?—I should think it was my duty to propose to the committee for general purposes, that a part of them, with the medical gentlemen, should go to see what that complaint was, and inquire into it.

When was the last complaint of that nature made to the committee for general purposes in that parish?—I do not recollect that any such complaint was made except very lately; then the person was sent there on Tuesday or Wednesday, and upon the Friday or Saturday he was removed to Bedlam; the wife of that party came to complain that he had received a very great injury by being bound; it was represented to the board of directors, and they summoned Mr. Jennings to attend the committee upon the next Friday, to examine how it was that the man received this injury; and it turned out afterwards that the man came bound to the work-house by cords very tightly, but he had been bled in the arm and the stagnation of that blackened all his arm before he was removed; he was three or four days at Bethnal Green and then he was removed to Bedlam, and we discovered then from the woman's own statement and our examination, that what injury the man sustained was prior to his coming into the charge of the parish.

Has not your attention been very much turned to the subject of asylums for lunatics?—No.

Have you not taken a very active part with regard to a proposition for building a general lunatic asylum for the county of Middlesex?—No, I never have.

Have you not had frequent discussions in your vestry whether you should recommend the building of a pauper lunatic asylum?—It has been moved two or three times before the vestry.

Did not you oppose the building of a lunatic asylum?—I did not oppose it.

Mr. Matthew Davis, called in; and Examined.

WHAT are you?—I am superintendent of one of Mr. Warburton's establishments.

Is that the establishment adjoining the White House?—Yes.

By whose direction do you attend here?—By direction of Dr. Warburton.

Will you have the goodness to state the object of your attendance to day?—I understand the cause of my attendance is to state how many times a week

Mr.
John Main.

23 June 1827.

Mr.
Matthew Davis.

Mr.
Matthew Davis.

23 June 1827.

Mr. Warburton and the doctor visits the establishment ; I will say, that on Tuesday and Friday Mr. Warburton and Dr. Warburton visit the establishment.

You are speaking of the White House?—No, I am speaking of Bethnal House. Have you many pauper patients in that establishment?—I have 290.

How many are there in the other?—I cannot say.

Are all yours pauper patients?—No, there are some private.

Do you mean that there are that number of pauper patients in your establishment alone, independently of the White House?—Yes.

How many of those are males and how many females?—About half and half.

How many keepers have you for the pauper lunatics?—Four men and four women.

Do you keep four keepers for the male pauper patients alone?—Yes.]

And four for the women?—Yes.

Have you increased them lately?—No, about thirty has been the regular number of servants.

Who is your medical attendant?—Mr. Dunston, Mr. Cordell, and Mr. Dunston's assistant.

Generally speaking do you follow the same system in your establishment as they do in the White House?—My instructions have been to treat the patients with every kindness.

But you follow nearly the same system?—Yes.

Are the pauper patients in Bethnal House, patients belonging to the different parishes in the county of Middlesex?—They include Middlesex and the country.

Can you state how many you suppose you have that are pauper patients belonging to the county of Middlesex, or Westminster, or London?—Sixty-seven women belonging to Middlesex ; and I think there are ninety-seven altogether.

Have those pauper patients ever been visited by the Middlesex magistrates?—By Colonel Clitheroe and the Honourable Mr. Bouverie, a few days ago.

But previous to that investigation those pauper patients were never visited by the Middlesex magistrates?—No.

Who were they visited by?—By officers belonging to the parish, the medical attendant belonging to the parish.

Have you had any reason to suppose that the Middlesex magistrates conceived that there were any pauper patients in your establishment?—I should suppose so, because it was always returned with the White House ; I have seen Lord Robert Seymour at Bethnal House ; Lord Robert Seymour has been over Bethnal House.

Had you pauper patients belonging to the county of Middlesex in your establishment last year?—Yes, I have had them for years.

Had you not more pauper patients in the year 1826 than you have now?—No, about the same.

Lunæ, 25^o die Junii, 1827.

ROBERT GORDON, ESQUIRE,

IN THE CHAIR.

Dr. Robert Hooper, called in ; and Examined.

Dr.
Robert Hooper.

25 June 1827.

YOU are a physician attending upon the poor of St. Mary-le-bone parish?—**I am.**

Have you been in the habit of periodically visiting the establishment of Mr. Warburton, with Mr. Goodyer and the surgeon?—I have.

How often in the course of a year?—Regularly once in the month, and at other times perhaps, if it were necessary ; that happens but now and then.

Have you ever been in the male infirmary?—I do not know of such a place by that name ; I know of no particular name, except the White House.

Have you ever been in any room in the White House appropriated to the sick male patients?—There is a place that I have been in frequently to see those who were under acute disease, when I paid my visits, which was the convalescent department ; I do not know it by the name of the male infirmary, probably it is the same.

When

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Dr.
Robert Hooper.

25 June 1827.

When did you first go into that room?—It must have been many years ago.

Mr. Goodyer, the surgeon, states, that he went into the male infirmary about eight months ago, that he did not know that it existed till about eight months ago, and that it was in consequence of the communication of the discovery of that room made by Mr. Birdwood, that he went into the male infirmary; the Committee wish to ask you whether you ever heard of that male infirmary previous to this discovery taking place?—I have heard of patients going from the places where they were generally confined into others, as they recovered or were recovering, which we considered to be the convalescent department.

Were you ever in the room previous to its being discovered by Mr. Hall and Mr. Birdwood, at the time Mr. Goodyer states he first knew of it?—I recollect about four or five months ago, Mr. Hall told me that he had discovered a place; I do not recollect that name being given to the place, and of course I knew nothing of that place unless I had been taken into it; I knew it by no name; I believe that I have been all round the house upon very many occasions; I do not know that any one place has been kept from my inspection; if there has been a place called the male infirmary, I do not know it by that name.

Were you not there when Mr. Goodyer discovered the room?—No, I have not been into any room lately; now if it is only within these eight months, I have not been in it.

When Mr. Hall explained to you that he had discovered that room, and described the state of that room to you, did you recollect that you had ever been in that room?—I have not been into any room that answers to such appellation; but I believe I have been in every room of the house.

When Mr. Hall mentioned to you that he had made a discovery of a room, did it strike you that that was a discovery to yourself also, as well as to Mr. Hall, or did it appear to you that it was a room you had been in?—I believe so; I had no idea of there being a room in that house which I had not been in; it made very little impression upon me at the time.

Did he describe the room to you?—No; I think as I was going through a ward of the infirmary at Mary-le-bone, he said, "we have been into a ward that we had not seen before," addressing himself to Mr. Goodyer; I turned round and said, "what is that?" he said, "a place we have discovered," but he gave no name to it.

Was there not an apartment discovered upon that occasion which you had not seen before?—I believe I have been in every part of the house; but it may be necessary to explain the nature of my visit at this house; I go there whenever I am requested to go, and regularly once in a month; I am accompanied by Mr. Phillips, the surgeon of the establishment, and Mr. Goodyer the apothecary; they have to attend to my directions, and they have also to attend to the directions given to them by the guardians of the poor; I have but one duty to attend to, which is to ascertain the state of the minds of the patients I go to visit; my attention is given wholly to that; if there happens to be any acute bodily disease that any of the patients are suffering under, at the time that I make my visit there, the regular medical attendants for bodily infirmities profit by my presence, and ask my opinion, and I say what I think is proper; but my visit there is solely to ascertain the state of the minds of the poor who are placed there by the guardians.

If your attention is particularly turned to the minds of the patients, you can state whether you consider that any curative process with reference to the mind goes on in Mr. Warburton's establishment?—In a general way there is; for example, there are many patients that I direct to have porter two or three times a week; there are many patients that I order a fuller diet, for there are many that I desire to be kept upon a more abstemious plan; there are many that I direct setons to be put into their necks, or issues; for many I order blisters, and for many I order medicine.

How often do you return to see whether your orders are complied with, and to see the effect of that treatment?—Monthly.

Therefore you only attend monthly, after having directed this curative process to proceed, to see the effect of that process?—Certainly.

And you have reason to believe that your directions are attended to?—I know nothing to the contrary; if any case appears to me to require my attendance oftener, I have gone and seen it, but my orders are to attend once a month.

Is a report made to you at the end of the month, of what has been done according to your direction?—I have my own book before me, and when John Thomas comes in, I know him; I see what I have ordered; if I have ordered any thing, and I of course direct my inquiries whether such and such things have been attended to.

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Then you wish to impress upon the Committee that you consider that a curative process does go on in that establishment with regard to the mind?—Certainly.

Do you consider that to be efficient?—No, certainly not; in the generality of cases it is very good, but for many it is quite inefficient.

You consider it in some cases efficient?—Yes.

Will you explain how you came to answer this inquiry in the following manner, which was contained in a letter sent to you; “What is your opinion of the treatment and maintenance of the pauper lunatics, as now adopted in your parish, as to the efficiency or inefficiency to promote cure, and the expediency of establishing a Lunatic Asylum for the county? *Answer.* It is totally inefficient to promote cure. R. Hooper, M. D.”—It is very correct; I believe my evidence is to the same effect; there are many cases that are perfectly incurable, perhaps one half; it matters not where they are.

Does your answer as to the inefficiency of the treatment to promote cure refer to those patients that are incurable?—No.

Will you have the goodness to explain that?—The patients that are sent there are many of them epileptic patients, whose minds are after an epileptic paroxysm or attack, very much deranged, and who, during the epileptic attack, are very unmanageable, they are generally incurable cases; now I conceive that such cases, if they are looked after to see that they do not hurt themselves, that they are taken proper care of under the paroxysm of their epilepsy, and that they have comfort afforded to them when the paroxysm goes by, are as well there as in any other place affording them similar attention. There are very many melancholy, whose aberrations of mind constitute what we term melancholy madness; I do not think the situation at all calculated to effect the cure of melancholy madness. There are some few that go there under acute maniacal sufferings, furious madness, the place is perfectly inefficient for the cure of those I conceive; perhaps another class may be said to be those that have delusions, cases of lunacy, I do not think that place well calculated to remove delusions; that is the distinction that I take.

You divide the patients into four classes?—I would.

Of those four classes three you conceive receive no benefit in the establishment of Mr. Warburton; the epileptic you conceive properly taken care of at Mr. Warburton's?—Yes.

And the other three you conceive are left without an efficient system of cure?—Precisely.

Those three you conceive receive no advantage from the treatment they receive at Mr. Warburton's?—They do not derive efficient advantage.

Did the former part of your evidence rather allude to the alleviation than to the cure of that description of patients?—Yes.

Then the Committee are to understand that whatever you said previously, alleviation and not cure has been the object of your evidence?—Yes.

Do not you consider that the pauper patients to whom your attention is confined are sent to Mr. Warburton's establishment more as a place of safe custody than with reference to the removal of their mental disorder?—I think in general that may be answered in the affirmative.

Do you consider that the patients labouring under mental affliction are to be considered generally as invalids, and that they ought frequently have medicine administered to them?—I would say, following up the division I have instituted, that those who are suffering under acute maniacal paroxysms are very much benefited generally by those means that are considered and which are adopted as curative, that very many of those of another division, that I consider to be cases of lunacy or in a delusive state of mind; are benefited by arrangement and management and diet more than by medicine; I would say that the other division, epileptic patients, occasionally require medicine, because other diseases supervene from the epileptic attacks; the other class, consisting of melancholy, are very much benefited by medicine occasionally, and very much more by management.

You know Mr. Warburton's establishment well, there are from 160 to 170 male pauper patients in that establishment, how many of those 170 patients should you imagine ought to be under process of medicine?—Perhaps ten or twelve.

Not more?—I should think not.

Is there no room in that house of Mr. Warburton's where pauper patients in a sickly and dying state are conveyed from their constant chambers for sleeping?—Yes, I have seen them in other places which I believe I mentioned; convalescent patients.

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The question applies to pauper patients who are in such a bad state of health, either from epileptic attacks or other acute disorder, as to require a separate apartment for their care?—I am not aware of any other than I have mentioned.

Looking at the word infirmary in its ordinary acceptation, do you conceive there is no room in the house appropriated for such a purpose?—I did not know that there was, till Mr. Hall mentioned such a ward.

When was your last visit made to the establishment?—Last Friday.

Then after the mention of this room by Mr. Hall, was not your curiosity excited to ascertain which was the apartment to which he alluded?—It made so little impression upon my mind that I merely referred it to Mr. Goodyear and to Mr. Phillips who regularly go over the house; I am seated as the Committee are now, attended by those males or females who have had the care of the patients and by the master of the house; and they come before me and I direct my attention to them, unless we go to see them from any cause; my duty is not visiting particularly.

Your duty is not to visit the house and to see the accommodation that the house affords, but to watch the course of the minds of the patients?—Yes.

So that whatever goes on in the house you know very little of?—Surely.

So that in fact all the knowledge that you can state positively is as to the general sanity or insanity of the patients?—That is what I more particularly direct my attention to, the rest is casual.

Therefore you would dislike to give your medical opinion of the patients both as to the manner of their being kept and of their being managed?—I should dislike nothing that would afford relief to those unfortunate beings; what I know I will state fairly.

Will you take upon yourself to say that the whole of that house is managed, as far as the pauper lunatics are concerned, in a proper manner, both with regard to the treatment of the patients and with regard to that conduct and so forth, which is essential to their mental recovery?—With respect to the treatment of the patients, I believe they are very well looked after; with respect to the recovery from their mental disease, I think for more than two years I attended very fully to the exhibition of medicines in a very attentive manner, and very little good resulted from it; the conveniences were not sufficient to enable me to go on in the way that I wished to go on, that opinion I stated to the directors of the poor; and more than that, urged from year to year the necessity of their building within their own walls a place to take care of their pauper lunatics, as those situations were not efficient for that purpose; I have stated that yearly to them.

With regard to the general treatment you conceive it to be good, now the general treatment regards the arrangement, the accommodation and the diet; now can you state what is your opinion upon those three points?—I believe the diet to be very good; we always in our visits there pass by the dairy or the place where the meat and the bread and every thing is kept, and we have always found the best of things there; with respect to diet I believe there is every attention given to that, and that they have a proper diet; there is of course a regular diet for the whole house, and those maniacal patients that suffer under delusions have the same diet with those that suffer under epileptic attacks; the diet is general, and consequently that is not an efficient diet; then with respect to arrangement, I do not consider that there is any thing like arrangement there tending to the recovery of the patients.

What is your opinion as to their bodily health and comfort?—Their bodily health is not much benefited by their being ten and twenty together.

Have you been in that asylum oftener than once or twice a year?—Oftener than that.

Do you know what the dietary is of that establishment?—Yes.

Does it include salt provisions?—I think they have occasionally salt provisions.

Do you consider that salt provisions are generally advantageous to persons labouring under mental insanity?—I seldom allow any of my patients to take salt provisions.

In fact is not salt meat given once a week?—Perhaps it is.

You think that is erroneous?—They have 9 s. a week to maintain their patients, and they give their diet accordingly.

When you give directions as to diet with regard to the mental cure of patients, do you give those verbally or put them down in writing?—I put them down, the directions are principally with respect to porter or wine or spirits.

Is there any book in which memorandums are put down so as to insure a constant attention to your orders?—There is a book or paper, our directions are always written down and given to Mr. Jennings.

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When you stated there was a deficiency in arrangement, do you include in that the want of classification?—Yes, there is no arrangement at all; that is the first step to be attended to.

Would you separate those four classes you have mentioned?—Certainly, I would never let a person have the care of more than two who are recovering from a state of insanity; but instead of that they are all mingling with their fellows, and there is perhaps one keeper to take care of twenty.

Mr. Goodyer was asked, "Have you reason to believe that Dr. Hooper or Mr. Phillips were aware of the infirmary as to which you have been examined?" To which Mr. Goodyer replies, "I am satisfied they were not?"—Then I dare say he was correct; my answer was general, that I had been all over the house repeatedly.

Do you wish the Committee to understand that you were not aware of that infirmary till you heard of it from Mr. Hall?—Precisely.

What you say as to the general treatment of the pauper patients in that establishment is matter of opinion on your part, and not derived from any positive and actual knowledge of your own?—I have had no other knowledge of course than from what I have seen as to the effect produced there.

Have you ever been there on a Sunday?—I may have been, but I do not recollect it.

Were you aware before the inquiries took place before the board of guardians of the poor, that the crib-patients were confined during the whole of Sunday?—No, certainly not.

You attended here to-day at the request of Dr. Warburton?—I did.

Do not you consider that the confinement of crib patients for such a length of time must be very injurious to them?—Certainly; I consider it improper to confine patients, unless there be an order from a medical man to confine the patient; in practice I have no patient confined unless it be for some particular reason; for example, I had a gentleman some time ago who cut his throat, and that man was obliged to be confined continually for more than six weeks, and the only alteration in his position was effected by his two or three keepers, about him.

Under a proper arrangement, even in such a case as that, would the confinement be necessarily confinement hand and foot to the floor?—No; I do not know what case requires that.

And a periodical confinement cannot be necessary?—I should think not.

Mr. Goodyer was also asked, "Was not blame thrown upon you and the other medical persons by the Board for not having previously investigated the house, so as to find out the existence of that room?" To which Mr. Goodyer replies, "There was some blame imputed to us, but I do not think it was very serious, we excused ourselves." Do you recollect the circumstance of the board of guardians having blamed you and the other medical attendants for not previously discovering the existence of that room?—Certainly I was never blamed, and if they had imputed any blame at that time to me, it would have been very ill applied; I have always discharged my duty there; I do not think it is my duty nor Mr. Goodyer's to go to that house and say let me look into every corner and every cellar; they went there with specific directions to look after the state of their minds, to see the state of the places in which they are kept, and in which they slept, and to see that all things were as well conducted, as to ventilation and accommodation, as they could be.

Were you not present before the guardians of the poor, when an investigation took place relative to that room, at the period to which Mr. Goodyer refers?—I do not recollect that I was.

Were you not present in the room when the guardians of the poor commented upon your conduct and the conduct of the other medical practitioners for not having previously found out this room?—I know nothing of it if it was; and I do not recollect hearing any thing when I have been before the directors, who are my masters, in sending me where I went; I have generally been talking with one or the other, excepting when I have been under examination respecting any particular subject; I recollect the time when I went there once in a year, and I thought it so improper and so wanting of attention, that I was myself the cause of monthly visitations to that house.

Are you aware what portion of air and exercise the patients have in that establishment?—Very little; I am so aware of that, that I have been one of the principal movers to endeavour to get a better place for them.

You do not apprehend that any curative process could be efficiently carried on without air and exercise?—It is very necessary; but when it is considered that one
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keeper has the care of twenty or thirty people, the Committee will be struck immediately with the impropriety of it, and with the inefficiency of curative means.

Are you aware of the number of keepers that were in attendance at that establishment upon the pauper patients?—I presume it is about one to twenty or thirty.

Why do you presume that?—From the number that I see; that they are crowded beyond measure there cannot be a doubt, and that they are taken every care of consistent with the arrangements that they have, I who have been there very often do firmly believe; that the means are inefficient for the purposes of cure I also believe; and so I have stated in my letter, perhaps if I have stated “totally inefficient” it may be too strong an expression; but the spirit of my letter is what I have stated now.

Would you consider one keeper to twenty patients insufficient, supposing those twenty patients were of one class?—No; there should not be five to one keeper of melancholy, not perhaps four to one, and every case of acute mania requires perhaps two keepers, and when they are recovering more especially; the management of a mind that is just recovering from insanity is every thing; and if the patient is suffered to be with others who are talking nonsense, and making a noise, it is more likely that his insanity will be fixed than cured.

If it were practicable, do you think that hard labour would be useful?—Very many cases would be cured by it.

Mr. Benjamin Cook Griffenhoffe, called in; and Examined.

ARE you one of the guardians of the poor of St. Pancras parish?—Yes.

Can you give the Committee any statement relative to the care of the pauper lunatics of that parish?—I am not only one of the directors of the poor, but I am one of the committee for general purposes, who have more immediately the care of the workhouse and the superintendence of the pauper lunatics; I have attended them four or five times at Bethnal Green, when they were brought before us, and from what I saw there, I confess that I neither think the premises eligible for the cure, nor the treatment adequate to the cure of them, and at the time that a circular was sent to the different parishes, I was very anxious for a pauper lunatic asylum; the rest of the vestry were very much against it; but after a reference to our medical man and several meetings, I at last brought them to agree to it, *nemine contradicente*, upon my reminding them what was brought before us upon our visit. When we asked them “have you any thing to complain of, and have you every thing that you wish for?” one man looked very sapient upon the business, upon which one of the directors said, that that man said, I shall not answer that question, for the last time I did I was jacketted. We asked a woman if she had every thing she wished for, and hoped she would be better, and she said “well, I will speak out whatever may be the consequence; I do not know what you pay, but if you pay more than 3s. 6d. a week you pay too much; the tea is chopped hay, the soup is the washing of the dishes, and the meat is very bad, very inferior;” upon which Mr. Jennings laughed, and we smiled, and she went away. There was another woman, who said, “Do you, gentlemen, just come and look round, and ask us whether we have every thing we wish for, and then go away, because if that is all you do, you had better stay away, and save the parish the expense of your carriages.” Therefore, I conclude, we cannot do much good.

Mr.
B. C. Griffenhoffe.

At what time was it when the woman complained of the diet?—It was about a year and a half ago.

What is the name of the pauper who so complained?—I do not know; there are about fifteen or sixteen women belonging to our parish.

What do you know of a man of the name of Elton?—In order to ascertain the interior arrangement we went over the house every time, but we merely went into the rooms and the dormitories, and I found that the counterpanes were piece counterpanes, equally clean and equally whole, and I was not quite satisfied as to that; I asked if there had been any pauper that had been there that had recovered, upon which Mr. Grant, our clergyman, said “Yes, there is a man of the name of Elton, and I will send him to you;” Elton came with his wife, and he stated that he was confined in a crib; I recollected his countenance immediately, and he recollected me; I said “had you come from that crib to us,” and he said, he had more than once or twice been brought from the crib to us, though we were not aware that he was in a crib at the time; I then asked him what he had for breakfast, he said he had oatmeal, upon which his wife said, “I clubbed sixpence, and my son-in-law

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clubbed sixpence, and we got him tea." Elton replied, putting his hand upon his wife, and the tears gushing from his eyes, "Yes, you did, but the tea was so bad that I preferred the oatmeal;" that was a confirmation of what the woman had said as to its being chopped hay.

Did he tell you that he was placed in a crib?—Yes.

Did he state that he was there from Saturday night to Monday morning?—I asked him what religious instruction he had on Sundays, he said that he did not see any one from the Saturday night to the Monday morning; I asked him, "How do you relieve nature," he said, "I being well could get up to the wall, but there are others who do it and lie with their faces towards it afterwards."

Did he say that they were so kept from Saturday night to Sunday morning in their filth?—Yes; I asked him, "how do you get refreshment?" he said, "one of the patients comes and looses my right hand, and I sit up and get my food."

Did you ever ask whether he was taken up on a Sunday morning to be washed?—I understood he was not.

Did he describe how he was washed on Monday morning?—No.

Was Holmes a crib patient?—No; Holmes had been in the workhouse, and was assisting the master in carving the meat, and I sent for him, and then I asked Elton how many keepers there were, and he said, mentioning their names, four; then when I saw Holmes, I asked him how many keepers there were, and he said four; two for the rich and two for the poor; I asked if he knew William Elton; he said, yes, he did; I asked him whether he knew he was confined in a crib, and he said, yes.

Then, as far as you know, there were only two keepers for the poor patients?—Yes, that is what was represented to me.

How long was Holmes there?—Before I became a director.

When did you see Elton when he gave you this history?—I think in the month of April in this year.

Have you been in the habit of visiting this house for many years?—For about three years.

Mr. John Wilson Rogers, called in; and Examined.

Mr.
J. W. Rogers.

HAVE you turned your attention to the state and condition of Lunatic Asylums in the neighbourhood of London since the publication of your pamphlet?—No, I have not; I have had no opportunity at all.

That is about twelve years ago?—Yes.

What is your station in life?—I am a surgeon.

In your professional duties as a surgeon, have you had occasion to turn your attention to the management of the insane and establishments for their reception?—Yes.

Was your attention to this subject continued for many years?—Yes; I attended the whole of Mr. Warburton's establishments for about twelve years.

Are you acquainted with the laws by which those establishments are now regulated?—I am, generally.

Do you conceive that the system of visitation and inspection, which is now provided by law, is adequate to secure to the public the proper regulation of those establishments, and the humane treatment of the persons confined in them?—No, I do not.

In what respects do you consider that law to be inadequate for the purpose for which it was passed?—I think they are generally aware at what time the inspection will take place, and therefore they are on their guard always, in getting the patients in proper order; and I think when the inspection takes place it should be done quite unexpectedly.

During your experience of those establishments have you any reason to know that arrangements were made previously to the days of visitation so as to show the establishment in a better state than it was in at other periods?—Yes, frequently; they were always aware when the parish officers were coming.

What preparations were made for the reception of visitors?—They were made a little cleaner; they had clean things put on; they were not allowed to appear in their dirty state, and they endeavoured to get all the vermin out of them that they could, and they put on clean blankets.

Have you been present at any of those visitations of the parish officers?—No, I cannot say that I ever have; I have been amongst them when they have been going round.

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Are you aware whether there was a free communication allowed between them and the patients, so as to permit the patients to make complaints to them?—No; they never dare say any thing.

Have you ever known them say any thing in the way of complaint?—They have complained very often of the bad treatment that they have had, such as being beat.

To whom?—To me.

Not to the parish officers?—No, I have heard of instances where some have made bold enough to tell them.

Have you ever known any punishment ensue in those cases?—No; I cannot say that I have.

Are you acquainted with the times of visitation of the commissioners?—Yes.

Do you conceive that the system of inspection which is provided by law is sufficient for the purposes for which it was intended?—No, because I think that the inspection should take place without the people who keep the house having any knowledge of their coming.

The same objections apply to that that apply to the inspection of the parish officers?—Yes.

How are they made aware of it?—I do not know how they get the information, but they always know it very well; Mr. Warburton is intimate with most of the medical men.

Do you consider that that inspection would be more efficient if there were persons not medical men joined with the medical men in the commission?—Most undoubtedly.

Why do you think it would be more efficient if persons not professional men were associated with the physicians?—I think they would be a little sharper and insist upon looking into every particular part of the house which the physicians perhaps, do not do.

Do you consider that they would be more independent as well as more vigilant?—To be sure.

Did you ever observe how the patients were treated on Sunday?—No, I do not know any particular treatment on Sunday.

Were you ever there on a Sunday?—Many times.

Are you aware of the manner in which they keep the crib patients on a Sunday?—They keep them in bed all day on Sunday; they fasten them down.

Do you mean that they are kept from Saturday night till Monday morning so confined?—Yes.

Have you seen it?—Yes.

Have you any reason to believe that they were taken up on Sunday morning to be washed?—They were allowed to lie in their cribs all Sunday without being washed.

Do you know that?—Yes; they lie in the slaughter house.

During the time that you were in attendance upon the White House, you say of your own knowledge, that it was the custom to keep them in their cribs from Saturday night to Monday morning, and you do not believe they were taken up to be washed on Sunday morning?—Yes.

Do you know any reason for selecting Sunday for that purpose?—Because they gave part of the keepers a holiday on that day.

Did you ever direct that any pauper patient should have a change of diet?—Yes.

Do you believe that that change of diet took place?—Yes.

As a medical man, did you ever remonstrate with Mr. Warburton with respect to the management of the patients particularly on a Sunday?—No, I was so circumstanced that I could not do it.

How many pauper male patients were in the White House when you attended it?—Perhaps one hundred or more; they were very much crowded.

How many regular keepers were there?—Two at least; there was one keeper to the room and one assisting.

During the time you were there do you ever recollect more than two keepers regularly appointed for the pauper patients?—No.

Do you conceive, as a medical man, that two keepers are sufficient for a hundred patients?—No, certainly not; there never are sufficient to any of the establishments; there are not at Saint Luke's keepers enough to feed them; they often hand the meat to a convalescent patient, and say there take it to such a one, and while he is going on he will eat it himself, and the man who is confined will perhaps go for two or three days without any thing to eat.

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Do you mean to say that that takes place at Saint Luke's?—Yes.

Have you been in Saint Luke's lately?—No.

Have you ever been in new Bedlam?—No.

Have you ever been in any other asylum in the neighbourhood of London except Doctor Warburton's?—No; I have been in Burrows's occasionally, I had a patient there once; and I have had a patient at Miles's.

Subsequently to the publication of your pamphlet, it is presumed you have not been a great favourite with the keepers of those establishments?—No; they have ruined me in consequence.

You stated that the patients were afraid to complain of their treatment; if they were not ill treated in consequence of that complaint, what were they afraid of?—They would not be afraid then.

Did not you say, that they were not ill treated in consequence of making complaints?—I said that I was not a witness to it.

What sort of state was the infirmary in when you were there?—The general appearance is clean; but there is one place particularly bad, a room where they put the paralytic patients, for example, in; there are seats all round, with a place to do their occasions in, and there they sit stewed up as hot as possible. Some little time ago I visited an old woman at Hackney about 85 years of age; she had something the matter with her hand, and she was certainly of an insane family, but she was incapable of doing any mischief; and a few days afterwards I heard the neighbours say that they were about to confine her in the White House, and they said it was a great shame, because the poor woman had got about four or five hundred a year. I said it would be infamous to do such a thing; and if they put her in the White House, I knew the management of it so well, that she would be dead in a fortnight. They sent her, and the poor creature lived but a few weeks.

Do you know that she is dead?—Yes; she only lived a few weeks.

How long ago was that?—I think it was about a year ago.

Was she sent by her own relations?—Yes.

Was she sent to the private side of the White House?—They are all in a bad state; it is all for the lower order of people, it is not intended for respectable patients.

Do you know this fact of your own knowledge?—Yes.

Are the Committee to understand, with respect to Saint Luke's, that a convalescent patient is employed to feed the others, and the meat being given to him, he eats it in his way; and the chained patients go two or three days without?—Yes; I had it from a keeper himself.

In the pamphlets which you published in the year 1816, you detailed certain abuses then existing; do you consider that those abuses were abuses originating out of the state of the law, or accidental circumstances arising out of the practice?—I think they arose out of the state of the law.

Do you consider that while the law stands in its present condition, without a more efficient check or a better system of visitation, it is impossible to feel a confidence that those establishments will be well conducted?—Certainly not; it is impossible.

Do you think it possible for the number of cures to take place in the private establishments for the pauper lunatics that might take place if there were a general public lunatic establishment?—I am sure it would be a wonderful benefit towards the cure of patients if they were kindly treated.

Mrs. Elizabeth Jennings, called in; and Examined.

Mrs.
Elizabeth Jennings.

YOU are the wife of Mr. Jennings the superintendent of Mr. Warburton's White House establishment at Bethnal Green?—Yes.

You have more particularly under your direction the female pauper lunatics of that establishment?—Yes.

Have you any thing to state to this Committee on the part of Mr. Warburton or Dr. Warburton?—No.

You have also the immediate superintendence and the issue of the small stores for sick diet which are used by the pauper patients of that establishment?—Yes; every thing in fact goes through my hands, and my sisters, and Mr. Jennings's.

Are those stores furnished whenever they are required, either by the medical men or by the keepers?—Yes; they come to me for them.

Do you keep any account of the issue of those stores?—Not any.

Do you keep any account of those stores when they are brought in?—No.

Have you no book which contains any account of the quantity that is brought in, or the quantity that is issued?—We have bills, but I never saw them, because they come quarterly; with regard to arrow root, and those things, they come in when we order them.

Then you have no account of the quantity of those articles that are brought into the establishment?—No; when I want any thing, I tell Mr. Jennings that such a thing is wanted, and he orders the things.

And you cannot tell what quantity of sago or arrow root, and other articles of that nature, has been used in that establishment for the last twelve months?—No.

Have you the management of the tea?—I give it out.

What sort of tea is it?—Green and black.

What is the price you pay a pound for green tea?—I think it is 7s. 8d. or 8s. 10d. I do not know which; but we have it from Alley's, in Conduit-street.

What is the black tea?—It is either 7s. or 8s.

For the paupers?—We make no distinction with regard to the tea.

Will you undertake to say, that all the stores are of the best sort?—Yes.

And you do not use an inferior quality of tea?—No.

Will you undertake to say that none of the lunatics have given up drinking tea in consequence of its bad quality?—No.

If that has been stated is it an erroneous statement?—I should consider it so.

Do you give any pauper lunatics tea?—Some of them have it when it is ordered.

Do you furnish the stores whenever the keepers ask you for them without any check?—Yes.

You never make any inquiry as to whether they are using more than is necessary?—No, I never have had occasion to do so.

And no observation has ever been made when the bills have been carried in to Mr. Warburton?—No.

And he always pays those accounts without making any observation?—I am not in the room when those accounts are settled between Mr. Warburton and Mr. Jennings, but I never heard of any observation being made.

Do you recollect a lunatic of the name of Elton?—I think I do.

Do you recollect his making any representation upon the subject of the tea that was furnished?—No.

Do you know whether his friends subscribed a shilling a week to enable him to have tea?—Yes.

Did he continue to have it as long as that shilling a week was paid?—Yes.

Was that shilling a week paid as long as he stayed there?—That I cannot say.

You do not know that he preferred oatmeal because the tea was bad?—No.

Are many of the patients supplied with tea by their friends?—Yes; they bring perhaps an ounce or two ounces, and they make it themselves, some of them.

Why do you suppose they have tea from their friends, if you furnish them with it?—I have seen them give it; we do not profess to give them tea unless it is ordered by a medical gentleman.

Do the keepers generally make the arrow root?—The keepers generally make it; it is scarcely one time in fifty but what they make it.

Do you know any thing about the keepers at the house?—Very little about the men.

You do not know how many there are?—No, I do not.

Can you give the Committee the name of any other keeper who was in the habit of attending the pauper patients a year ago, except Barnard and Dolby?—Yes, we had several, but I do not recollect their names; there was a man of the name of Sharp.

Before Sharp came who was there?—I cannot say.

Previous to Sharp coming, you cannot give the name of any other keeper except Dolby and Barnard?—I know there were more; but I cannot charge my memory at this moment with the name.

You generally receive notice beforehand of the visitation of the parish officers; do they send word over night or in the morning?—We never had the least notice whatever of any parish officers coming at any period since I have been there.

You reckon Barnard a very honest man, do not you?—Yes, I have every reason to suppose so.

You would always be inclined to give credit to any representation that he made to you?—Certainly.

Mr. John Dunston, again called in; and further Examined.

Mr.
John Dunston.

25 June 1827.

WHEN you were examined on the 21st of June, you were asked this question; "Do you keep any register of the nature of the cases under your care and the medicines by you administered," to which you answered "No;" Do you persevere in that statement?—I do keep none now, I have not done for some time.

[The following questions and answers were read to the witness from the evidence of Mr. Cordell on the 21st of June:]

"What sort of register is it that Mr. Dunston keeps of the patients? A very correct one.—Is it in a book? A large folio volume, and I believe for neatness as well as correctness of detail it is a pattern for every professional man to adopt.—Does that constitute the means you have of going on with the system of medical attention? Precisely.—That constitutes the instructions which he hands over to you? Perfectly so; for months back we have had occasion to refer and I have never found his young man fail in the reference; and I have said, look at your book I am applied to for a repetition; he says, I have looked and I cannot find it; and I say go back further, and it is invariably found.—Is this book kept at Mr. Warburton's or at Mr. Dunston's? At Mr. Dunston's.—In that book is there any thing else besides Mr. Warburton's patients? I believe it may contain in other parts of the book his private practice; he has a separate common book for Mr. Warburton's house, but that is what is called a day book; but that is all very faithfully transcribed into the book for reference on future occasions.—So that if you were to visit any person that was sick you might upon reference to that register of Mr. Warburton's patients discover the system of treatment which had been followed for weeks before? Precisely so.—When you visit the patients he hands the book over to you? Yes.—At this moment he is not attending the establishment on account of the illness of his wife? No, he has a very able assistant.—At this moment you are doing the business for him? I am.—Therefore you have the book in your possession? No; I do not have it in my possession; I only have it when I want to use it, the book is at his house and I take an extract from it; the book is a voluminous one, and I send it immediately back to Mr. Dunston in order that the preparations that may be required may be made.—Does the register contain the symptoms of the disorder, the prescriptions that are given and the diet that is directed to be given, or what does the register contain? The nature of the malady and the medicines which they are taking, and from that I should naturally infer if I see the person, the diet that would be suitable under those circumstances.—So that in point of fact you could trace for years back by that book, the system of management that has been administered to all of the pauper patients in the establishment? No doubt of it.—What is the difference between the register and the day book? I believe the day book is merely a rough copy of the book.—Are you quite sure about all those things being contained in the register? Most undoubtedly, if I have occasion to refer to it I find it correct.—Will you have the kindness to describe that book to the Committee accurately? It contains the name, the complaints and the medicine.—What do you call that day book? I should call it the day book.—Are the contents of that day book always transcribed into the register? I believe always.—Have you ever seen that register? I have constant access to it.—And if you wish to refer to any case that has occurred, you can always find it? Yes.—How far back do you think you could trace the medical treatment of any case in that book? That is not possible for me to answer.—For a twelve month? For years and years; I could not answer that question with accuracy for this reason, Mr. Dunston had a partner, who about four or five years since died, during the lifetime of his partner he scarcely ever required my assistance, unless it was some very important operation; since his death I can vouch for its accuracy.—That is for six years back? Yes.—Then for six years back you can trace every thing in that book No doubt of it."

After having heard that evidence of Mr. Cordell, in which he states the existence of such a book so accurately kept, will you have the goodness to state whether you still persevere in your answer, that you keep no such register?—I do keep no such register; I have no recorded register later than the period stated in that book I have sent.

What period is that?—In 1819.

Have you looked at the book?—I have looked at the book.

What

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Mr.
John Dunston.
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What do those entries mean which bear the date of 1821?—Those have reference to my private practice; this is the last entry relating to the White House—(*pointing it out*); that book was kept for three years; after I was remunerated by an annual payment, in order that it might not be stated that no medicine was sent to the patients; and my partner said it was attended with great inconvenience, that he saw no practical utility in it and it was discontinued.

Mr. Cordell having stated that which has been read to you, must have stated it under an error?—Yes; but there has been a small book in vellum, a waste book, in which, if I have not been able to superintend the composition of the medicines myself, I have transcribed them myself, in order to avoid errors; it has been the practice to copy the medicines from that book, and that, I believe, is what Mr. Cordell refers to.

Is that the book called the day book?—No, it is the waste book.

Is that preserved?—No.

Then how would it be possible for Mr. Cordell to trace the treatment of the patients for the last six years in that book?—Mr. Cordell could not do that; the book does not last twelve months.

Then that cannot be the book to which Mr. Cordell refers?—I do not know that it is, but I know of no other.

You are in the habit of destroying those books?—I am.

Therefore it would be impossible for Mr. Cordell to refer to that book in his evidence?—Certainly it would.

Therefore the whole of Mr. Cordell's evidence upon that subject is inaccurate?—I conceive it to be so.

Have you any other occupation besides your medical occupation?—I am not aware that I have any other, except the ordinary employments of life.

Are you a director of any public companies?—I am a director of the Imperial Gas Company.

Are you not a director also of the Arigna Mining Company?—No; I was.

Mr. William Daniel Cordell, again called in; and further Examined.

YOU have stated, in your evidence on the 21st of this month, that there is a regular and correct register kept of all the circumstances relative to the patients?—I believe I must correct myself a little in that statement; I presumed that this book, which I had never heard of being discontinued, was continued; but I have since learned, that in consequence of the trouble it gave, and the necessity no longer existing of its being continued, that it was discontinued; I confidently believed it to be continued, but I understand in that I was completely in error.

Mr.
W. D. Cordell.

You were asked, upon a former occasion, "Does the register contain the symptoms of the disorder, the prescriptions that are given, and the diet that is directed to be given, or what does that register contain?" The answer you gave to that was, "The nature of the malady, and the medicines which they are taking; and from that I should naturally infer, if I see the person, the diet that would be suitable under those circumstances."—"So that, in point of fact, you could trace 100 years back by that book the system of management that has been administered to all the pauper patients in that establishment?" To which you answered, "No doubt of it." You were also asked, "Are the contents of that day book afterwards transcribed into the register?—I believe always." "Have you ever seen that register?—I have constant access to it." "And if you wish to refer to any case that has occurred, you can always find it?—Yes." "How far back do you think you could trace the medical treatment of any case in that book?—That is not possible for me to answer." "For a twelvemonth?—For years and years; I could not answer that question with accuracy, for this reason, Mr. Dunston had a partner, who about four or five years since died; during the life-time of his partner, he scarcely ever required my assistance, unless it was some very important operation; since his death, I can vouch for its accuracy." "That is, for six years back?—Yes." How do you reconcile that statement with what you now state?—There does appear to be great contradiction, certainly; but till I had the matter explained, I supposed it was correct; I had seen this book open, and supposed that it was continued.

Are the Committee to understand that you made that statement when you were last before the Committee, not having in fact looked into that book for the space of eight years?—That is very probable.

Mr.
W. D. Cordell.

25 June 1827.

And yet you stated to the Committee that you had constant access to it?—I considered, that if it was necessary I could have had it sent; but I find that it is not continued; it is an involuntary error of mine.

You were asked, "Are you quite sure about all those things being contained in the register?—Most undoubtedly; if I have occasion to refer to it, I find it correct." Do you mean to say that that statement is correct?—I mean to say that it is not correct.

You said that the register contained the name of the patient, the complaint, and the medicine; do you mean to say that you ever in one instance have found that it contained the name of the complaint, and the medicine?—No, it does not.

Therefore that answer of yours is incorrect?—Yes.

You were asked, "Have you ever seen that register?" To which you answered, "I have constant access to it." Have you, in fact, constant access to it?—I presumed that I could have.

Then, in fact, you have no access to it?—No.

Do you mean to state that the whole of the evidence you gave to the Committee on the 21st of this month relative to the existence of this register, is perfectly incorrect?—Perfectly so; for upon inquiry I find it is so.

You were asked what the size of the book was, and this book was shown to you—[*one of the Reports of the Commissioners*]*—*and you said it was of that size?—I said it was a folio, and this is the book to which I referred [*the book sent by Mr. Dunston*].

How long have you been in the practice of assisting Mr. Dunston?—For some years past.

For how many years?—For six or seven; since the death of Mr. Salmon, his first partner.

Have you ever made reference to that book?—Never.

Then how could you speak so confidently as to its contents?—I was rather presuming that its contents were correct from knowing Mr. Dunston's general correctness of business; I drew my conclusions from the papers furnished to me, with the patients names and the medicines they take; I have put questions and I had answers furnished to me.

You have been attending Mr. Warburton's establishment for the last few weeks?—I have, but I keep no register of that, my attendance is perfectly gratuitous out of my friendship for Mr. Dunston.

Do you know the cases?—I believe pretty generally.

You keep no register yourself?—Not being my own patients I keep none.

Are the Committee to understand, that all you have stated with reference to that book alluded to a period eight or nine years ago?—I alluded to no particular period.

Are you quite sure there is no such book in existence as that you referred to in your former evidence?—I am convinced that I have not seen such a book, because this is the book to which I referred—[*the book produced by Mr. Dunston*].

Will you state to the Committee why you conceive that book was discontinued?—I cannot account for that, that is an act of Mr. Dunston's and not of mine; I believe there was no longer a necessity for its continuance.

What were the reasons for its discontinuance?—That I cannot tell; I should say that the reason is, that it is not so necessary now as it was when he might be called upon to give an account of the value of his services.

Did he state that to you?—It was stated to me by him.

In fact you have had some conversation with him upon this subject?—I have asked for the books for my own satisfaction.

When was this told you?—This morning.

Did you happen to put it to Mr. Dunston whether there was such a book in existence?—No.

Did you express your astonishment that all you had said the other day was incorrect?—I might express my astonishment, and he said I was certainly wrong for that he had not done any more than make out the paper that he handed over to me, his own pocket list.

Do you or do you not believe that there is any permanent memorandum or register kept of the treatment of those pauper patients by Mr. Dunston?—I believe certainly none; that is my firm belief, that there is not a permanent memorandum kept.

Not even a waste book?—That is the young man's.

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Is that book kept by the young man, the book that you alluded to?—No, the book that I alluded to is a book of Mr. Dunston's.

Have you ever referred to that book of the young man's?—Yes; he has kept that as a memorandum of what he has done; but that has been only kept about six weeks, since he has been there.

Therefore, in the month of April last you had no memorandum to refer to?—No, because this book had been discontinued at that time; I was not aware that it was discontinued, I had an impression that it was continued.

Is there any memorandum in existence?—There is the young man's account, but that is a mere waste book.

What does Mr. Dunston call that book?—It is not his book, it is his young man's book, to account for the medicines he has sent there.

Is it a book bound like this—[*one of the reports of the medical Commissioners*]?—No; it is an old book that has been worn out which was appropriated to something else.

You stated that you conceived that book was continued?—I thought it had been.

Will you state when you first learnt that any book of this sort was kept at all?—Years ago, in Mr. Salmon's lifetime, when I have seen him writing in it.

In what capacity were you then with relation to Mr. Dunston?—Friend and neighbour; I was in no capacity for any specific object.

At that time had you access to this book?—When I say access to it, I had no right to have access to it; I have seen the book; I have had it shown to me; and I have noticed it as remarkable for great neatness and accuracy.

Do you mean to say, that at that time when you were simply his friend, you were then in the habit of seeing distinct entries in the book with regard to the pauper establishment?—That is the time when I saw it.

And since you have been acting for him, in visiting this pauper establishment, you never have looked at those entries?—Never; I most frequently send my prescriptions home from the house where I write them, or else, when I go home I send them on to Mr. Dunston's.

So that when there was no reason for your looking at the book, you did look at it, and when there was a reason for looking at it, you did not look at it?—It may be construed in that way.

Have you ever made extracts from that book?—Never; when I alluded to making extracts from the book, I referred to short periods when Mr. Dunston is unable to attend.

Did you or did you not ever make an extract from that book?—No; I was confusing this book with the young man's book at home, the common waste book.

Is the young man's book as large a book as that?—No, it is a common ledger.

Is that common day book in existence?—Yes, it is the young man's private book.

Supposing Mr. Dunston to have stated that it is his habit to destroy those books, how should you account for that?—I should not account for it at all, because that is an act of his and not of mine; I was asked if I could refer to the book at any period of time, I said that I could do so; but it will be recollected that there is hardly any patient there but what is of short duration, three weeks or a month.

You say you never took an extract from that book yourself?—No.

On the former occasion you were asked, "Therefore you have the book in your possession?" to which you answered, "No, I do not have it in my possession, I only have it when I want to use it; the book is at his house, I take an extract from it; the book is a voluminous one, and I send it immediately back to Mr. Dunston;" how do you reconcile that with your present statement?—I never had it in my hand, that is quite a mistake of my own.

Are the Committee to understand that this answer which has now been read to you is utterly untrue?—It must be so.

As it is perfectly clear that your evidence to day is utterly contradictory to that which you gave on a former day, the Committee wish to know which they are to believe?—The evidence of to-day; because I have the means of information which I had not then.

Then you stake your veracity upon the evidence of to-day?—Yes.

You mean to say, that the evidence you gave on Thursday last is incorrect, and that the evidence you have given to-day is correct?—Perfectly so.

Is the rest of the evidence true or false that you gave on Thursday; is what you stated with reference to the management of Mr. Warburton's establishment true or false,

Mr.
W. D. Cordell.

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false, as far as your knowledge went?—It is perfectly correct as far as my knowledge goes.

Then how do you account for making so many errors regarding this book, while you maintain that the rest of your evidence is perfectly correct?—That must rest with the Committee rather than with me; I have merely stated my apology for being led into an error by supposing that that book was continued; but I find it was not continued, and that the extracts that were made were made from the small book.

Do you mean to say that in that small book there was any account given of the state in which the patients were?—No.

In your former evidence you described the book you referred to as a book giving an accurate account of the treatment of the patients?—I only meant with reference to the medicine that was given.

You are aware that this Committee have power to report your evidence to the House if they think fit?—I am perfectly aware of that.

You are also aware that this Committee, by reporting you to the House, may place you in an unpleasant situation if you do not state the fact?—I believe I have stated every thing that I know, but I have been led into an error.

Have you not had some discussion with Mr. Dunston upon this subject?—No; he has been out of town, I did not see him till this morning.

Did you not see him on Friday or Saturday?—Yes; I saw him for one minute.

The Committee understood you to say, that Mr. Dunston ceased keeping a register similar to that which has been produced after the death of Mr. Salmon?—From the period that he himself speaks of.

And you say that you began assisting Mr. Dunston soon after the death of Mr. Salmon?—Yes; but very rarely at first.

That is about five or six years ago?—Yes.

It appears that no register has been kept since the year 1819, how can you account for that interval?—I cannot account for that any more than having seen such a book; I thought it was continued.

You have been attending the White House a good deal for the last six weeks?—Yes.

Have you no sort of register by which you can refer to the cases you have attended?—I have no register; I go and prescribe for the patients according to the symptoms that I see them suffering under.

Is not that a very inconvenient mode of practising?—It might be so in some cases.

In your own practice would you pursue that mode?—Probably not; but where you have so great a number to attend to it would occupy too much time to make a register of each case.

Mr. Garrett Dillon, again called in; and further Examined.

Mr.
Garrett Dillon.

WHEN you visited the infirmary did Mr. Main accompany you?—Yes; I introduced him.

You mean to say that Mr. Main went with you into the infirmary?—Certainly, to see a man named John Blacklock, who was a schoolmaster at Kentish Town.

Mr. Main was asked this question, “Did not you go to the infirmary with Mr. Dillon?” Mr. Main’s answer was “Never, I never knew which was the infirmary; I have heard Mr. Dillon frequently say, that it was only in the early part of this year, that he himself had seen the infirmary;” again he was asked, “Did you ever accompany Mr. Dillon into the infirmary of that establishment?” to which he answered, “No, I never saw the infirmary;” Mr. Main having made this statement, do you still persevere in your statement that Mr. Main did accompany you to the infirmary?—Most unquestionably; I wish the Committee would examine the keeper that went with us into the infirmary; it is probable that if the name of Blacklock were mentioned to the man he would recollect it.

Who was the keeper?—I think it was Barnard.

Did you ever make any complaint in the presence of Mr. Main to the guardians of the poor of Saint Pancras as to the general state of their pauper patients?—Repeatedly.

In the presence of Mr. Main?—Yes, so far that I recommended them to build wards upon the premises for the reception of their pauper lunatics, and to give them a fair trial before they were immured in that asylum; it was agitated in the Board of

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of Directors, and Mr. Main himself brought forward the very subject when I recommended wards to be built.

Mr. Main was also asked, "Did Mr. Dillon ever state to the committee of which you are a member, that improper treatment was practised towards the pauper lunatics in Mr. Warburton's establishment?" to which Mr. Main's answer was, "I have always understood that he was perfectly satisfied with the treatment that the pauper lunatics had there; that has been the general understanding up to within these very few months." Is that the fact?—It is not the fact, inasmuch as I represented to them that it was not a fit place to send pauper lunatics for cure; and I begged them years ago, and repeatedly since, to build wards in our parish, in order to give the pauper lunatics a fair trial; and it was under discussion at one time, at this time twelvemonth, and Dr. Roots my colleague advised the same.

Then it is not the fact that you represented to the Board of Directors that you were satisfied with the treatment of the pauper patients?—Decidedly not; I mentioned to Colonel Bird, that we were going to take down the names of the individuals to lay them before the magistrates of the county, and I said publicly, "they know well at Bethnal Green that I am not satisfied with their system."

Mercurii, 27^a die Junii, 1827.

ROBERT GORDON, ESQUIRE,

IN THE CHAIR.

Dr. John Bright, called in; and Examined.

ARE the registers of the commissioners in your custody?—They are.

And you have constant access to those registers?—I have.

Are you acquainted with the contents of the registers, generally speaking?—I am.

Do you know the contents of the register as relating to Mr. Warburton's establishment at the White House?—Every register must contain minutes relating to that house, as of course visits are annually made to it.

From those registers, and from what you know of the White House, what do you consider to be the character of that establishment?—Judging from the same sources of information which such part of the committee as have perused the register have access to, I should say it is improved.

Comparing it with other establishments for the reception of pauper lunatics?—I should have the same opinion; I mean, that it has made pretty nearly the same progress with many others of the same date, for they spring into existence every now and then; it is a sort of commercial speculation.

Comparing the state of Dr. Warburton's establishment at the White House with the other establishments for the reception of pauper lunatics, do you consider it worse than the generality, or better than the generality?—I should say, that it is worse than some and better than others.

In point of comfort and in point of management?—I think in point of comfort, and in point of management, except with reference to the crowded state, and except with reference to certain abuses to which the Committee have already directed their attention, it is as good as others.

Before this inquiry from the registers, do you conceive that the commissioners estimated it as above the average or below the average?—I consider it was in an improved state with reference to its condition many years before; and with regard to others, I should think, as good as the rest. I think I have seen establishments lately, which perhaps from containing a smaller number, I should be disposed rather to prefer.

The question relates to the comfort and the management of it; do you conceive it to be below the generality of such establishments?—Not below the generality.

You would consider it as good as the generality of licensed houses where paupers are received?—Yes.

Do you find in practice that considerable carelessness exists with respect to the certificates?—There appears to have existed considerable carelessness.

Dr.
John Bright.

27 June 1827.

Dr.
John Bright.

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Have the commissioners had occasion to complain of deficiencies in that respect?—Yes; there is one point which is said to impart legality to the certificate, which is frequently omitted, namely, the use of a seal; and that it has happened frequently that the person into whose house the lunatic was received, being a medical person, has signed the certificate, which the commissioners have reprobated, and which is now going comparatively into disuse.

Have you ever met with instances where the certificate has been signed by persons who never saw the patient?—It is stated in one of the Reports, that an individual signed the certificate of the insanity of another, and formed his opinion thereon from report and previous knowledge of him, and that he had not seen that patient.

Is there any case stated in the register, where a certificate was signed several months before it was put into execution?—"William Fox, a pauper from the parish of Lambeth, appears to be neglected by his family, and he alleged moreover, that he had not seen the medical man that signed the certificate on his last admission for several months before that period." I recollect, not very long ago, seeing a female who had been in confinement for some time, and she stated that the medical man who signed the certificate, had just looked into her room and made a bow to her, and said no more, and upon a view so hasty as that, signed the certificate; that was the information of a person who had been an inmate in a madhouse.

Was that a physician?—It was an apothecary in Islington. There is a case in page 237 of the Report, dated April 17th, which states that a certificate had been signed by a medical practitioner by whom the patient had not been seen since August last, the certificate being dated in March.

With regard to the person signing the certificate, have the commissioners had occasion to remonstrate?—They have; the Act is so exceedingly vague, that with great reluctance they are obliged to acquiesce in the signature of persons of whom they have no testimony as to medical fitness. There was a case, of which I was lately informed, of a person, a retail chemist and druggist, calling himself an apothecary, who induced a brother of his to sign some instrument, by which property to the amount of about 3,000*l.* was disposed of, and two days after the execution of that instrument, he took this brother to a madhouse, he himself signing the certificate as a medical person.

Is that a case within your own knowledge?—It is a case of which information came to me a little time ago; it is, I believe, likely to go under investigation in a court of law.

Is that man still in confinement?—I had an opportunity of inquiring about him a few days ago, and I heard that he was liberated by the brother that put him in; the original informant that told me said that it was another brother that liberated him; he is at large now.

How would you limit the right of signing certificates?—I think it would be well if it were expressed generally persons legally authorized to practise, if it were confined to persons belonging to the Society of Apothecaries, belonging to the College of Physicians, and belonging to the College of Surgeons.

Would a chemist be legally authorized to practise?—It depends upon the interpretation that was put upon the Act; I think it would be much safer if two persons duly authorized to practise were required to sign the certificate.

Do you conceive there are many apothecaries practising in the country who are not duly authorized to practise?—I presume there are; but I do not apprehend that the law takes any notice of them, if they were in practice before the passing of the Act; I think there is a case in one of the books of a person signing a medical certificate, who had not been for ten years before in practice.

The name of every person admitted into a lunatic establishment is obliged to be returned; is there any case in the register of the insufficiency of the law in necessitating a true return to be made?—I recollect there was one case of that sort; but the returns are sometimes made as Mr. Brown or Mrs. Brown, or Mrs. Smith, and so on, and sometimes C., which may stand for Charles or Charlotte; so that it happens occasionally, when the House of Commons desires to have information to know the relative number of the sexes of lunatics, it is impossible to approach to accuracy under such vagueness.

Do you suppose that the returns are often made under false names?—That particular case I have alluded to is the only one that I am aware of; but I was reminded on Friday last of an evil which is very great indeed of the same house, containing pauper patients, and patients not paupers, which is this; if a patient pays at the same rate at which a parish pays for a pauper, they ignorantly conclude that such
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a person is not required under the Act to be returned, and it happens that they do not return them. On Friday last the commissioners had a visitation at a house where they saw two patients, whom they found amongst the paupers, who were not pauper patients, and when the inquiry was made, an answer was given that it was concluded that as the payment was the same, they were not to be returned.

Where was that establishment?—That was at a very good house indeed, a new house at Peckham.

Is there any certificate or return required for a pauper patient?—There is no certificate or return required for a pauper patient.

Have you any means of getting a list of the pauper patients?—No; the commissioners have resorted to their law advisers, and have been told that there was no obligation to make such a list.

Have they likewise taken any legal opinions as to their having any visitation or control in case of the workhouse taking charge of its own pauper lunatics?—They have, and they found the Act gave them no power of visitation.

Do you find often great neglect on the part of friends and relations?—I am afraid there is a great unwillingness on the part of relations to permit the state of their friends to enter into their minds.

Have the commissioners had occasion to remonstrate frequently upon that subject?—The commissioners have occasion frequently to call the attention of relatives to the state, and sometimes the neglected state, of the patients.

Will you turn to the register of May 26th, 1825, and see whether you find any case of that sort?—"It did not appear to the commissioners, after a careful investigation, that Mrs. P., a patient in this house, is at present labouring under insanity; and it was stated by the keepers of the house, that she had not exhibited any marks of insanity for more than twelve months; the commissioners directed the secretary to state these circumstances to her husband, in order that her further confinement, if necessary, may be justified by more particular and repeated examination of some physician."

Will you turn to February the 23d, 1827?—"Mr. P. reported, that Mrs. P. had conducted herself well since the last visitation, and stated it to be his intention, as her friends had taken no notice of the application, to liberate her."

At what house did that take place?—It was at a house kept by a person of the name of Pell, called Gloucester House.

Have the commissioners any reason to know whether she is now liberated?—I believe they have not.

Have you any reason to know whether she is or is not released?—I have no reason to know that she is; I know that she was on the eve of being released, but I know that it was necessary to expostulate rather warmly with her husband.

Will you refer to the first volume, page 268, and read an entry which appears there?—"Mr. H., whose case has occupied the attention of former commissioners, is reported to have shown no symptoms of insanity for eighteen months past, and the secretary was directed to call the attention of his friends to his case, and to desire that a sufficient investigation may be forthwith made by some competent medical practitioner, in case his friends shall deem his longer confinement necessary."

Do you conceive that it is possible that persons may be kept in these establishments after they have recovered?—Possible, it certainly is, because the commissioners have no power to liberate.

Your impression is from those minutes and from your own observation, that such cases have occurred and do occur?—I would not take upon myself to say that they have not certainly.

Is not there a habit of retaining persons who are sufficiently good as boarders in the establishment without returning them?—I believe it is; there are statements in this book of that sort.

Do the statements in that book confirm you in the opinion that persons are kept in those establishments after they have recovered their senses?—I have no hesitation in saying, with respect to the case I have mentioned, that that was the case; I conceive it very possible that such cases may happen.

Do you think it has happened?—I have not in my own recollection any case passing in review; but I do admit the possibility and even the probability of it.

Would you suggest a periodical report of the different cases?—I think that patients not paupers, are in a worse condition as far as regards care and supervision than paupers; because, except the visits of the commissioners, there is no medical visit that applies to all of them.

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Is there any check whatever to prevent persons who are sane being admitted?—
I am not aware of any; it must depend very much upon the kindness of friends.

Will you turn to an entry of May the 13th, 1818?—There is an entry relating to three houses of Mr. Warburton's under the name of Mr. Talbut.

Do you find any complaint of their being crowded?—That was a complaint that was reiterated again and again; the entry is, "No alteration has been made in the several divisions of this establishment, two of the small straw bed rooms beyond the large day room of the pauper men are close, and require more ventilation;" the report closes with saying, that they are too much crowded.

Will you read an entry of November the 24th, 1818, relating to the same establishment?—The report concludes with saying, that those houses are still too much crowded.

Will you read an entry of November the 30th, 1821, relating to Mr. Talbut's house?—"These houses are well managed, but too crowded."

Will you read an entry of December the 3rd, 1822?—"These houses are too much crowded, but they are well conducted."

Will you refer to July the 1st, 1823?—"These houses are well managed, but are much too crowded."

November the 25th, 1823?—"The buildings and appointments of these houses have undergone no alteration; well managed houses, but the number of patients is too large for the means of accommodation."

December the 8th, 1824?—"Good houses, but too crowded."

Do those entries all refer to the White House?—Yes.

Will you turn to an entry with respect to Casey's house in 1820?—"There were no bars to the windows of the rooms in which the patients were sitting; the windows were closed down and the rooms very close and offensive; a very badly managed house."

Will you read an entry of October 28th, 1820, relating to the same house?—"It appears that the medical certificates are not signed till after the admission of patients into the house, a practice which the commissioners reprobate; the attendance is not sufficient for the care of the patients, and very little vigilance is used to protect them from danger; a very indifferent house and very badly managed."

Will you read an entry of June 22d, 1821, relating to the house of Mr. Casey at Plaistow?—"The windows of the bed rooms in which the patients pass the night without any attendants are not defended by bars, and the only entrance to the men's bedroom is through that occupied by the women; the commissioners went up a staircase said to be stopt, and found at the end of it a ruinous room prepared with staples for the confinement of any violent patient; and which they further found was occasionally occupied by one of those at present in the house;" there is another observation in the entry; "An establishment which the commissioners regret they have not the power to suppress."

Will you read an entry of November the 30th, 1821, relating to the same house?—"A house in a miserable state for the accommodation of patients; but somewhat less objectionable in its management."

Will you read an entry of July the 1st, 1823, with respect to the same house?—"Considerable repairs have been made throughout the house; it is improved thereby in its accommodation, but the chimnies of the bedrooms are for the most part stopped up and the ventilation is therein very defective; a moderate but improved house."

Will you turn to an entry relating to the house of Mr. Fox of Edmonton, dated April the 8th, 1823?—"One only of the private patients has a separate apartment and accommodation; Mr. Simmonds has the charge of the male, Mrs. Stevens of the female patients; the former with a gardner and the latter with one young female servant, are the only persons who are employed to do the work of the house and to take the superintendence and the management of thirty-four patients; the accommodations and apartments of the house are very inferior, the windows are generally broken, and the whole appears to be in a state of confusion."

Will you read an entry of March the 15th, 1824?—"The house of Mr. Fox at Edmonton; an indifferent house."

Will you read an entry of April the 13th, 1825, relating to the same house?—"Great alterations and repairs are in progress in this house, which on that account is in a state of confusion; the commissioners found a patient leg-locked by way of punishment in a darkened apartment, wherein lay another patient apparently dying."

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Will you read an entry of April the 28th, 1826?—"The compliment of keepers seems very inadequate."

Will you read an entry relating to Bryan's house of April the 29th, 1817?—"An ill-managed house."

Will you read an entry of March the 3d, 1818, relating to the same house?—"A very bad house."

Will you read an entry of December the 6th, 1819, relating to the same house?—"A house sufficient in its accommodations, but badly appointed."

Will you read an entry of May the 15th 1820, relating to the same house?—"A very indifferent house; the patients generally complaining of want of a due quantity of provision; the commissioners took an opportunity of examining the provision prepared for this day, which they found to be very insufficient."

Will you read an entry of April the 11th, 1821, relating to the same house?—"An indifferent house."

Will you read an entry of April the 25th, 1822, with respect to the same house?—"One of the male patients is ill and weak in bed, and occupies a small and close room on the ground floor, which is very unfit for his condition; a room beyond the wash-house which has been heretofore reprobated by the commissioners, contains a bed, which appears to have been recently used, and on inquiry was found to be so by one of the female patients, though the fact had been previously denied by a servant; a very ill conducted house."

Will you read an entry of November the 27th, 1816, relating to Mr. Burrows's house at Hoxton?—"Mr. M. a foreigner is not supplied by his friends with a sufficiency of clothing, and the secretary was directed to call the attention of Mr. H. of Wood-street to the necessities of his situation; a moderate house, but greatly too much crowded."

Will you read an entry of November the 6th, 1821, relating to the same house?—"These houses are old and ill accommodated to their present purpose, and the pauper divisions are too much crowded."

Will you read an entry of November the 19th, 1822, relating to the same house?—"The pauper males occupy a separate house in the yard, and their rooms, especially those on the ground floor, are close and not sufficiently ventilated; the pauper women have two day-rooms, both of which are close, but one is especially offensive; their bedrooms are close, and the chimneys generally stopped up, the only access to their houses is through the airing-ground of the superior men. A pauper female, named Sarah N. from Ramsgate, Kent, appears to have recovered, and Mr. Burrows states, that he stated as much to the parish officers a month since, and had received no answer from them. The secretary was directed to call their immediate attention to her situation." The Report concludes with saying, that "The buildings of this house are old and out of repair, and not well accommodated for their purpose; ventilation appears by no means to be attended to, and the paupers are too much crowded."

Will you read an entry of November the 24th, 1824?—"The rooms where the dirty patients are confined are very crowded and uncleanly in the different houses."

Will you read an entry of November the 24th, 1825, relating to the same house?—"This house is very much out of repair and ill managed, and it is recommended to the commissioners to revisit it soon."

Will you read an entry of February the 24th, 1826, referring to the same house?—"The commissioners do not consider that the supply of warmth and comfort which is furnished to the paupers is adequate and proper, and they learn with regret that this arises from the very scanty pay which is given by the overseers of the different parishes from which this class of patients is sent."

Will you read an entry of November the 18th, 1816, relating to Holt's House, at Lewisham in Kent?—"A very disorderly and disgraceful house."

Will you read an entry of April the 16th, 1817, relating to the same house?—"The house is not objectionable, but the explanations of the master, not being satisfactory, did not obtain the confidence of the commissioners."

Will you read an entry of May the 15th, 1820, relating to the same house?—"In a close room in the yard two men were shut by an external bolt, and the room was remarkably close and offensive. In an outhouse at the bottom of the yard, ventilated only by cracks in the wall, were enclosed three females, the door was padlocked; upon an open rail-bottomed crib herein, without straw, was chained a female by the wrists, arms, and legs, and fixed also by chains to the crib; her wrists were blistered by the handcuffs; she was covered only by a rug; the only attendant

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upon all the lunatics appeared to be one female servant, who stated she was helped by the patients. The secretary was directed to write to Mr. Holt, and convey to him the opinion of the commissioners, that the mode of confinement used for the paupers is harsh, cruel, and unnecessary; that the outhouses employed for the confinement of the patients are totally unfit for the purpose; that one female servant is insufficient for the care of them, and that the commissioners wish to convey to him in the strongest terms their sense of the bad management of the whole concern. The secretary was also directed to call the immediate attention of the overseers of the poor of the parish of Camberwell to the situation of this pauper, and to request them to communicate to him, for the information of the commissioners, what proceedings they shall think proper to adopt, which it is hoped will be such as to render the further interference of the commissioners unnecessary."

How many lunatics were there in that establishment?—Eleven.

Will you read an entry of the 21st of June 1820, relating to the same establishment, removed to Blackheath?—"The door of the outhouse used by the pauper men was open, and one person was confined therein by chains; the commissioners suspect the lower outhouse to be still used as a sleeping-room; they hold it to be an improper place for the confinement of any lunatics. They hold the accommodation and the management of this house still to be very inferior, and they recommend it to the early and especial notice of the commissioners next year."

Will you read an entry of November the 23d, 1822, having reference to the same house?—"One of the male patients was alone in an outhouse, without fire, the windows were recently broken, and probably by his own act; he was without shoes, but was in other respects sufficiently clothed. After considerable difficulty the sleeping apartment of this patient was discovered up a private staircase hid by the door, when that door was open which leads from the house towards the back yard; it is a single room, small and offensive, containing only a wet and dirty piece of sacking filled with straw, with one rug and a blanket. The patient is said to pay 20s. a week. Upon the discovery of this room, Mr. Holt avowed himself to be ashamed to show it to the commissioners, as they found so much fault with his arrangements. The secretary was directed to write to the friends of this patient, and to communicate to them the opinion of the commissioners, that the accommodation of this patient and the care which is given to him are very insufficient, and in consequence thereof to request that immediate attention may be given to his situation." Then comes the opinion of the commissioners generally; "Mr. Holt's conduct in endeavouring, by direct falsehood, to conceal from the commissioners the sleeping room of one of his patients, is highly reprehensible, and the management of the house and the care and accommodation given to the patients in general is very inferior."

Will you read an entry of June the 22d, 1821, referring to the same house?—"This house is somewhat improved in its arrangements since the last report."

Will you read an entry of June the 20th, 1822, relating to the same house?—"An indifferent house."

Will you read an entry of June the 16th, 1823, relating to the same house?—"A moderate house."

Will you read an entry of June the 25th, 1824, relating to the same house?—"A very bad, uncomfortable, ill managed house; the patients complained much of their treatment; as there seemed to be some ground for their dissatisfaction, it was thought proper by the commissioners that their friends should be informed of this."

Will you refer to October 18th, 1825, and state whether Mr. Holt's name appears in the list?—It does not appear.

Supposing you had hung up that report about Mr. Holt's house, in the room at the College, would not that have deprived him of those patients much earlier?—If it had been a matter of notoriety, of course it would have had the effect of discouraging any person who had a regard for his friend from sending him there; but with respect to hanging it up, I believe it was found very inefficient.

Are you aware that it was ever practised?—I suppose it was; my knowledge is principally derived from these minutes.

Can you deduce from those minutes that that practice, which is particularly directed by 14th of George the Third, by which the commissioners are ordered, "That in case the commissioners, upon their visitation, shall discover anything that in their opinion shall deserve censure or animadversion, they shall in that case report the same, and such part of their report and no more shall be hung up in the censor's room of the College to be perused and inspected by any person who shall apply for that

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that purpose." Can you trace in the books of the College that that direction of the Act of Parliament has ever been complied with?—I have no recollection in my perusal of those minutes of any occurrence which states that.

Can you state any reasons by which the visitors considered themselves justified in disobeying that positive direction of an Act of Parliament?—I can only state the fact that it has unquestionably gone into disuse, and before the Committee of this House, in 1815, the same fact was stated; and the reason that was assigned was, that it was found perfectly inefficient.

Are you aware, that since 1815 the College of Physicians has changed its situation, and though it might have been inefficient then, it might not follow that such publicity would be inefficient now?—It might be so; I know it is the feeling of the College that the legislature would make considerable changes.

Then you can give no reason to the Committee, except the reason of its being considered inefficient, for the commissioners having neglected that provision of the Act of Parliament?—I know that it has not been done, and I have always understood that was the reason.

Has the attention of the commissioners ever been called by you, or by any member of the Board, to the provisions of that Act with regard to this exhibition in the censor's room?—I do not know that it has.

Will you have the goodness to state whether the commissioners ever considered it to be their duty extra-officially to make any communications either to the Secretary of State or the Lord Chancellor, or any other public authority, relative to the condition of those houses which they inspected?—I do not recollect any such communication; they endeavoured to apply those powers with which they are entrusted to the execution of the Act.

Then are the Committee to understand that the commissioners do not feel it their duty to perform any act beyond that which they were directed to do by the 14th of George the Third?—The Committee will understand that I am only expressing the opinion of an individual; I should be sorry to be considered the expositor of the sentiments of the body.

In fact, it does not appear, from the minutes of the College, that the commissioners have ever made such communication to any public authority?—I am not aware that they have.

Have the commissioners taken any legal opinion upon the subject of making public the censures which they put upon their minutes?—The commissioners took a legal opinion, the object of which was to ascertain by what means publicity might be best given to any offences that came within their knowledge; and by the advice given by counsel with respect to that point, they were dissuaded from any publication in the newspapers: for instance, it was thought that they would run great risk that the slightest verbal inaccuracy would subject them to an action.

In all cases where the commissioners have thought proper, have they not used every means of remonstrance and authority which they had in their power to correct the abuse?—I really think they have, from what I have myself observed; and from what I have read, I am of that opinion.

Do you find that the funds arising from the fees paid on licences are sufficient to defray all the expenses incurred under the Act?—At the present moment the number of licensed houses being much greater than it has been, it is adequate to such expenses as, according to the Act, are incurred; but it would be inadequate to any very enlarged scheme of visitation, and heretofore it has been altogether inadequate; and the funds of the College, which are by no means ample, have been resorted to to supply those deficiencies.

John Sharp, called in; and Examined.

YOU were for some time a keeper in Mr. Warburton's establishment at Bethnal Green?—Yes.

John Sharp.

How long were you there?—I was there nine weeks.

Did you come there originally as a keeper?—No, I came there as a servant of Mr. Jennings.

In the room of Cooper?—Yes.

Was Cooper ill?—No, he was not; it was expected for him to leave, but he did not leave.

As Cooper did not leave, what did you do?—I assisted in looking after the patients.

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What patients did you particularly look after?—The pauper patients.

Did you ever assist in putting them to bed in their crib-rooms?—Yes.

That was part of your business?—That was part of my business.

Did you put them to bed on the Saturday night, and keep them there till Monday morning?—Yes, sometimes; they were up two Sundays during the time I was there.

Then during the other weeks you were there, were all the crib patients kept from Saturday night till the Monday morning in their cribs?—Yes.

Were they taken out on a Sunday morning at all?—No; we examined them, to see whether they were dirty, and if they were, we cleaned them.

They were never taken out to be washed on a Sunday morning?—They were not taken up.

They were kept from Saturday night to Monday morning in their cribs?—Yes.

If they were dirty, were they taken up and cleaned?—They were cleaned; they were not taken out, to remain up.

Were they taken out of the cribs at all?—They were taken out of the cribs, but not to remain out.

Were they ever washed on a Sunday?—No; we did not wash them on a Sunday.

Were they ever unlocked on a Sunday?—Their hands were never unlocked on a Sunday.

You have said they were not washed on a Sunday?—Their hands and faces were not washed, unless they were dirty; they were cleaned.

Was water used in cleaning them?—Yes.

How many crib-patients were there in your time?—Twelve, that I attended.

Were there more than twelve?—There were more in the house, but I did not have any concern with them.

Were those twelve always confined from Saturday to Monday when you were in the establishment?—Yes.

The same persons?—Yes.

How did you wash them when they were taken up on the Monday morning?—If they were dirty, we washed them with a mop.

With cold water?—With cold water.

Did you often use the mop?—Yes, very often.

Did you ever use hot water?—No, I never used hot water.

At what time of the year were you there?—I went there in November, and left the day the Duke of York was buried.

Did you never use any hot water the whole time you were to wash them?—I did not.

Did you ever see any used?—I do not recollect that I did.

Twelve crib patients were under your care, and you never used any hot water to wash them?—No.

Where were they washed?—In the crib room.

Were they ever washed in the court yard?—No.

What was the state of the twelve patients under your care?—They were very dirty.

Insensible to the calls of nature?—Yes.

Were any of them paralytic?—No.

Were they very violent?—Sometimes; sometimes they were not.

Did you ever have any flannel given to you to wash them with?—No.

Did you ever confine them for the whole day on any other day besides the Sunday?—Never, in the cribs.

Do you remember whether there was a copper that used to be filled with hot water close to the crib-rooms?—I cannot recollect.

You do not recollect that copper being heated every day for the purpose of providing hot water?—I believe there was a copper that was warmed every day.

But you never had any water from that copper to wash the patients with?—No.

Do you know why they confined them on a Sunday and not on any other day?—I do not know.

Were you there on a Sunday as much as on any other day?—Yes, I was.

Was Mr. Jennings there on a Sunday?—Mr. Jennings was there.

Always?—I do not know whether he was always.

Did Mr. and Mrs. Jennings ever go out on a party of pleasure on a Sunday?—I cannot recollect; sometimes I did not see him, sometimes I did.

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How many keepers were there besides you to attend the male paupers?—There were Dolby, Barnard, and Essex and me.

When did Essex come?—I do not know; he was there before me.

When you went away, did any body come in your place?—I do not know that there did, I never heard of any.

Was any body there before you in your place?—I cannot tell.

You do not know whether you succeeded any body?—No.

Was Mr. Jennings about the establishment every day?—I believe he was.

When it was necessary to beat the patients, what did you beat them with?—We never beat them.

Do you mean to say, that you never saw them struck with a broom stick?—No, never.

You never saw a broom stick used?—No.

You are certain of that?—Yes; sometimes they wrestle with them, shaking them and telling them that they must mind what was said to them.

What sort of food had they?—They had meat every day for their dinners; one day in the week they had pudding.

Had they all the same sort of food?—Generally.

You do not recollect any of them being put upon a different sort of diet?—No; without it was in the morning, some of them had coffee and bread and butter; that was allowed by their friends.

You do not recollect any of them when they were ill having a different sort of food from that which was commonly given?—I was not in the infirmary; I do not know how they were served there.

You never knew of any body that was not in the infirmary, having any different sort of food given to him?—No.

Have you been in the infirmary?—I believe I was in the infirmary twice.

What sort of state was it in?—It was very clean, washed every day.

Did you ever take any sago or arrow root to the patients?—I never did myself.

Used you to take any of the patients to their friends when they came to visit them?—No, I did not; Barnard does that.

Had not some of the patients a leathern strap about them?—Yes.

When you were dressing those patients, did you ever take off that strap, and give them two or three smart strokes?—No, I never did that.

Did you ever see it done?—No, I do not recollect that I ever did see it done.

Do not you know that it was done?—I do not know; I cannot say that it was.

Can you say that it was not?—I do not know, really.

Did you ever hear patients complain of being so treated?—No, I never heard any patients complain of it.

Why did you leave the establishment?—Mr. Jennings did not want me; the groom's place was not vacant; I was to have had the groom's situation, and as the groom did not leave him, he said he did not want me.

Did Mr. Jennings discharge you, or did you leave the establishment on your own accord?—Mr. Jennings discharged me.

Did not you find the place disagreeable?—I did not like it at all; I objected to the disagreeableness of the smells in a morning, I did not like that.

Were there any other circumstances in the situation that made you indisposed to remain?—Nothing particular.

What do you mean by the smell in the morning?—When they dirtied themselves; I had to go into the room first to open it.

Had you any patient that was getting better to assist you?—Yes.

Was he what you call a crib-room man?—He was not a crib-room man.

Had you no crib-room man?—No; there was a man that assisted in washing the rooms.

And assisted you in putting them to bed?—Yes.

One of the patients?—Yes.

Did you ever see him wrestle with the other patients?—Yes, he would sometimes.

And beat them?—I have seen him strike them.

Have you any recollection of ever having said to Mr. Solomon that you left on account of the cruel treatment of the patients?—I cannot recollect that I ever did say it.

Will you take upon yourself to say that you did not say it?—No, I do not think I said it.

Did you consider the treatment of the patients to be cruel or not?—No; it appeared

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appeared cruel when we wrestled with them sometimes when they were taking their physic; it did not appear altogether cruel, but it appeared hard to see the poor things insensible.

Have you seen their meat given to them?—Yes; I have given it to them.

Would you have eaten the same meat yourself?—Yes; I partook of the same sort of meat myself, just the same as the patients partook of.

When you had beef, what part was it?—Different parts.

Was it not generally from the neck, very grissly?—No, it was not; the soup, I believe, was made from that.

Did you never see that sort of meat given to the patients?—With their soup, but not without their soup.

Was the strait waistcoat ever used when you were in the establishment?—Yes, sometimes.

Did they put on the strait waistcoat when they gave the patients medicine?—Yes.

Did you generally give them medicine on the Saturday night?—I do not know; Barnard generally gave them their medicine.

Do not you recollect that Saturday night was a particular occasion on which medicine was generally given?—I do not remember whether it was so or not.

Do you think that the management of that house was better at the end of the time you were there than at the beginning?—I did not see any alteration, very little; I did not know there was any.

Do you remember the commissioners coming to examine the house?—Yes.

Did you prepare the house for the examination of the commissioners?—Not particularly.

Was it known before hand that they were coming?—Sometimes it was, and sometimes it was not.

When you did know it were any preparations made?—Certainly, we kept the house as clean as we possibly could; not cleaner than it was any other day; it was washed up stairs and down every day.

What preparations were made?—Only just raking the rooms with saw dust to make it look better.

Did not you know when the commissioners were coming?—I do not know; I heard they were coming sometimes, and sometimes I did not know they were coming.

How often were they there during the nine weeks you were there?—I do not know.

Did you see them more than once?—Yes.

Did you see them three times?—Perhaps I might twice or three times.

How long before they came did you know they were coming?—I do not know how long it was.

Was it an hour?—Perhaps an hour, perhaps more; sometimes perhaps they were expected a day or two before they did come sometimes.

Are you speaking of the physicians?—They called them the parish people.

Doctor Grant David Yates, called in; and Examined.

*Dr.
G. D. Yates.*

YOU are one of the commissioners appointed by the College of Physicians to inspect madhouses?—I am.

How long have you been performing that duty?—Since November 1825.

In the course of your duty as a commissioner, have you inspected many of the lunatic asylums in the neighbourhood of London?—Very many.

What is your opinion of the general system pursued in those establishments for the cure of mental disorders?—With respect to paupers, I should say they are not the houses for cure, because the mode of management is merely for confinement, as it appeared to me.

You consider them more as places of safe custody than places where a curative process is going on?—Precisely so.

Have you, as commissioner, felt it to be your duty to make reports unfavourable to any of those establishments since you have been appointed commissioner?—I have never been called on to do so; I do not know whether the Act imposes upon me to say what I see there, unless I am called upon to do so.

Have you never, since you have been appointed commissioner, signified your disapprobation of the proceedings in any of those houses, and signed that censure in the

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the register of the College?—I am not quite sure what I have seen, I have signed; but I have expressed disapprobation of some things that I saw in the management of the paupers.

Have you, when you have visited those houses, generally inspected every apartment of those houses?—Every apartment that we knew, and we endeavoured to find out all that existed in the house.

Do you consider that the visitation, as at present established by the College of Physicians, is efficient for the control of those establishments?—I do not, because the Act does not give them sufficient power; but the commissioners have always held the Act *in terrorem* over the keepers of those houses, who are ignorant of the extent of the power which the Act gives to the commissioners.

You are aware that the Act 14 Geo. 3. directs the commissioners, in case they shall find cause of complaint against any house, to have that complaint plaecarded in the censor's room of the College?—I am aware of that.

Has that practice been discontinued?—It has never been done since I have been a commissioner.

Has it ever been done since you have been a member of the College of Physicians?—Not to my knowledge; with the permission of the Committee I will state the grounds upon which I think the management of the paupers to be inefficient in those establishments; they run a race one against another in under valuing the price for which they are to be remunerated for the reception of those persons, and the consequence is this, that in many instances which we cannot find out, they do not discharge their duty to the full extent they ought to do from the want of pecuniary resources so to do; in some houses they take them in at eight and nine shillings a week, for which they clothe, feed, lodge them and give them physic; now it is practically impossible that they can do all these things for that small price, and upon that ground it is that I have objected more than once in conversing upon the pauper system with respect to private madhouses.

Have you any difficulty in stating that the establishment of a pauper lunatic asylum would be of the greatest possible advantage to pauper lunatics?—A remedy has occurred to me for what appears to me to be the deficiency in the management of paupers in private madhouses; which is, that any parish sending a pauper to a lunatic asylum should be compelled to pay a certain sum; or in other words, that no lunatic asylum should be permitted to take a pauper under a certain sum; and it appeared to me that that would remedy the defect in the present management; they are generally very well attended to, but in some instances I saw things that I did not like, and in one instance I went over at my private expense to rectify an error which I may say was rectified.

How would you propose to prevent the parishes keeping their lunatics at their own workhouses?—That could not be prevented unless it was compulsory upon the parish officers to send the lunatics to the asylums, and to allow so much for them.

Are you aware that the commissioners have ever thought themselves called upon to make any representations either to the Secretary of State, or to any other authority, as to the bad condition of those houses?—I cannot say that it did not occur to me, but they have not adopted it.

Have you ever suggested to the commissioners the making such a representation, and was such suggestion complied with?—I have suggested it.

What did you suggest upon that subject?—I suggested, in conversation after the meeting was over, one day in the course of last winter, the propriety of stating the situation of the pauper lunatics to the Secretary of State for the Home Department.

Was that representation attended to?—It was not forcibly made, but the hint was dropped, and nothing was done.

Is there a minute in writing made of all those medical visits?—There is of all the visits.

Do you conceive it would be an improvement in the constitution of the commission, to have the power of administering an oath, and of examining upon oath, so as to enable the commissioners to obtain immediate and direct information upon the spot with regard to any subject they might judge worthy of inquiry?—I think it would be attended with good.

If the commissioners were to be accompanied by magistrates, do you think that would be an improvement in their authority, with a view to conducting inquiries?—Having heard that idea mentioned, it occurs to me that it would be better if the commissioners were empowered to do the same thing themselves without a magistrate to prevent the necessity of a multiplicity of people going.

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Do you see any direct advantage connected with the present state of the law, which requires all the commissioners to be physicians?—I should say, it would be better that they were medical men.

The question refers not to the comparative merits of a commission composed altogether of medical men as at present, or a commission composed altogether of other persons not medical men; but whether a commission composed of a proportion of both, would not be better?—I cannot see any advantage attending the mixture beyond that of the one controlling the other in the discharge of his duty; with respect to examining any case of insanity, I cannot see any advantage.

Do not you think that the assistance of a magistrate, who is more in the habit of taking evidence and of investigating subjects than a physician, would be of material use to the physicians in their inquiries?—I presume not in cases of insanity.

For example, in the examination of witnesses as to the conduct of the house?—I should conceive that persons in the habit of cross-examination would be more competent to conduct such inquiries than other persons.

Do not you find a difficulty sometimes from not having persons with you of competent legal knowledge, in knowing how to act?—No; because the Act of Parliament states what we are to do.

Should you yourself, as a physician, feel any objection to act as a commissioner in a joint commission composed of both physicians and magistrates; instead of a commission composed only of physicians, both having a co-ordinate authority?—Certainly not; with the explanation that is given, that the magistrate is put in as a person more competent to cross-examine, because he could not be there in a medical capacity.

Mr. Jacob Jones, called in, and Examined.

Mr.
Jacob Jones.

DO you remember in April 1821, having visited a person of the name of Archibald Parke?—No.

Do you recollect having been called upon by Mrs. Parke to visit her husband, and in consequence you gave a certificate declaratory of his madness, and he was then confined in the White House?—I do not recollect the name.

He resided in Old-street Road?—Yes, I recollect him very well; the woman was a sister to the matron at the hospital. I understood that he attempted to commit suicide, or something of that kind; my partner, Mr. Camplin, saw him more than I did.

Did you sign the certificate?—I suppose I did.

How long before did you see him previously to having signed the certificate?—I do not remember.

Can you tell the Committee generally how long it was before?—I believe I saw him once or twice, or something of that kind; but I have minutes at home of the number of times that I see every patient. My partner saw him, I think, oftener than I did.

Are those minutes made at the time?—Certainly.

Do those minutes now exist?—Yes.

Then you signed the certificate upon what your partner had seen?—I saw the man.

But only once or twice?—I think not.

Was his conduct so outrageous that you were justified in giving the certificate?—Certainly; because I am always very cautious.

Do you think that seeing him twice was sufficient to justify you in giving the certificate?—With the account that I heard of the case.

From whom?—From the relatives.

Who do you mean by the relatives?—I think the wife; but I know that I am very cautious in every affair of the kind, and every thing that I did in that respect, I always attended to in a very conscientious way; I was quite ignorant of what this was for.

Had you ever heard of this man before?—I had been in the habit of attending some children at the house.

The children of a lodger?—Yes.

Therefore you had frequent occasions to see him?—I visited those children a good many times.

Whenever you visited there did you see him?—I am not certain.

Did you ascertain what state he was in when you were called in?—There had been some outrage committed; I do not know what it was.

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Did it occur to you to inquire whether that outrage arose from mental derangement or from intoxication?—Certainly.

Did you ascertain whether at that time he was intoxicated?—I am not certain.

Would not that be a natural question to ask?—Certainly.

Would the inquiry that you made as to the state this man was in appear in your minute book?—I do not think it would contain more than the number of visits that I made, and the medicines ordered, and so forth.

Do you recollect who originally called upon you to sign the certificate?—No.

Are you acquainted with Mr. Dunston who is the steward of Saint Luke's?—Yes, I know Mr. Dunston and his son very well; he is an old neighbour of mine.

Did Mr. Dunston ever talk to you upon the subject of this man Park?—No, I never exchanged a word with him upon the subject; I did not know what became of him at all.

You never heard any thing about this man since you sent him there with the certificate?—No, I have not seen the wife for years.

Are you in the habit of attending the family?—Not for years; I attended a sick child a good while there.

Had you never attended Mrs. Parke since you gave this certificate for her husband?—I do not think I did.

Nor before?—I believe we did at times attend her before.

You never thought of inquiring after this man subsequent to the certificate that you gave?—I think not.

Would you consider it sufficient to give a certificate for a man's insanity because you found that he had attempted to commit suicide?—I consider that if a man attempts to commit suicide, of which I have seen many cases of the kind; or if he is exceedingly outrageous, we must hear what the keeper would say of the person; I know that at the time I must have examined the circumstances thoroughly, and was well convinced in my conscience, that I ought to sign the certificate.

What did your conviction arise from, was it principally from the representation of the relations, or from what you saw?—Certainly, it was from what I saw myself.

You say that you only saw him twice, for how long each time did you see him?—I am not aware; the usual time is from ten minutes to half an hour, according to circumstances, sometimes an hour.

Do not you conceive that it is necessary to see a person several times before you make up your mind to so important a step as consigning him to a madhouse?—I had no idea myself of doing wrong; the case appeared to me a confirmed case, and seeing the man's conduct correspond with it, of course it induced me to think it right to do it.

Are you sure that when you saw him he was not very much in liquor?—I do not recollect the particular symptoms that he had; of course they were symptoms that I thought were symptoms of insanity.

But you formed your judgment of those symptoms upon an examination not more than twice, consisting of about half an hour each time?—I suppose so; perhaps I may have seen him oftener than twice, I could find out from my book.

Are you in the habit of granting many certificates for lunatics?—Not many.

What interval of time occurred between the first visit you made to this person and his transmission to the White House?—I am not sure.

Are you in the habit of granting those certificates frequently?—When they are called for of course; I could state how many I have granted, but generally I have had my friend Dr. Powell to examine them, and sometimes Dr. Sutherland; because I have been very particular in not letting any body be confined upon my judgment.

Did you take any such course in this instance?—No, I believe not.

If you consider it necessary in general to adopt such a course, how do you account for not having taken such a course upon the present occasion?—I presume it was on account of the poverty of the family, I suppose they could not afford it; but I am not certain about that.

Are there not various maladies which affect the mind in a temporary way, and excitements of passion which assume the character of mental disease, and which are difficult to be distinguished from it upon a short inspection of the party?—Certainly.

Is it not one of the effects connected with the use of ardent spirits and with strong excitement of passion and fever?—Certainly.

In any case in which the transmission of a party to one of those houses for the reception of the insane takes place without a considerable and prolonged inspection,

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is there not a possibility of that which is a temporary excitement being mistaken for a mental malady?—No doubt there is such a possibility.

You have stated that you have a book in existence containing the particulars with regard to this case?—With regard to the visits, we have a way of marking them in our visiting lists, and we have an account of medicines and so forth that is sent; and those marks I presume exist now, they are daily made; it is a paper similar to this, [*producing a paper.*]

As this paper contains merely the names of the patients whom you visit, and a simple dot made to express a visit, are the Committee to understand that the memorandum which you have of your visits with respect to the case of Parke is of a similar character to this?—Yes.

And no other?—No.

Therefore you have no other memorandum to account for the transmission of this individual to a house for the reception of lunatics than one containing those dots and marks?—No other whatever.

Can you state whether it is possible for any medical man upon a few visits, to distinguish accurately between cases of mental malady and those of temporary excitement?—In some cases it may be difficult, but it must have appeared to me plain before I signed the certificate; because I have endeavoured at all times to do my duty, as a man that has been long in practice and had some experience in that complaint, as well as others; I am always very careful, and I must have been thoroughly convinced in my conscience at the time, or else I would not have done it.

Do you ever visit those persons after they are transmitted to a lunatic asylum, to ascertain the progress of their case?—Sometimes I have.

Did you ever visit this person?—Never.

Have you never seen his wife since, or any of his family?—I think I have seen him, but not for two or three years.

Who sent to you first in this case requiring your attendance?—I am not sure.

Will you endeavour to tax your memory upon that subject?—I do not recollect.

Was it one of the family of the supposed lunatic, or was it any other person?—Indeed I am not sure.

Had you any communication upon the subject of that case, at the time, with any person connected with any of the public establishments for the insane?—Not at all.

Have you since?—No.

What fee was paid on the certificate?—I do not remember; I do not recollect any sum of money being paid upon the certificate at all.

You of course received a fee for signing the certificate?—I do not think I did.

Did you do it gratuitously?—I dare say I did.

Is that your habit?—Yes; there is a man now in Saint Luke's that we never had any fee for at all.

You will recollect that the family was not so exceedingly poor as not to be able to give a fee; because Mrs. Park, when he was first confined, supported him at 15s. a week on the gentleman's side of the establishment; what could be your reason for declining the fee?—Of course it was from my conviction of the necessity of the case, and also from what my partner saw of the case; but I have got an account of every thing that was received about that time, and from that I shall be able to tell whether a fee was paid or not.

Was your partner's attendance gratuitous?—Yes; because he was assisting me then as my partner.

If you are so particular in cases of this kind, and generally consult Dr. Sutherland or some other medical man, is there no record kept in any minute book of what takes place in those cases?—We make no record in particular, nor do we consider it necessary.

Have you ever heard of Parke since?—I do not think I ever heard of him since.

Have you not heard of him since the 2d of May in this year?—I am certain I have not heard of him this year.

Did nobody ever call upon you for the purpose of inquiring after Archibald Parke?—I have not seen any body; if my partner saw any body he did not tell me.

You do not remember saying, "Oh dear! I saw him about two years ago, he was quite incurable?"—No; I am positive I said no such words, or anything like it, and nobody interrogated me in that way; because if they had told me that I would have gone and seen the man.

Did you never make use of those words yourself?—No.

Have

Have you ever seen him since the period of his commitment?—No, I do not recollect that I ever saw him since.

How happened it that you signed the certificate when your partner appears to have seen more of him than you did?—I presume that he saw more of him, he was more in the habit of visiting the children at Mrs. Parke's than I was, and therefore I take it for granted that he must have seen him oftener than I did, but I am not positive as to that fact.

What aged man is your partner?—He is near forty years of age.

How long did your partner attend his family before his commitment?—I do not know; I think some time.

Was your attendance all gratuitous?—Not for the children; we were paid for the children; and very likely the medicine for this man was paid for, but I do not recollect having a fee from the family for signing the certificate.

Mr. Thomas Dunston, again called in; and further Examined.

WERE you ever acquainted with a man of the name of Archibald Parke, a cabinet maker, who lived in Old-street Road?—Not that I know of; I am seventy-six and my memory is not so good as it used to be; but I do not recollect that name.

Did you never know a woman of the name of Mrs. Parke, who was learning midwifery at the Lying-in Hospital near Saint Luke's?—I believe Mrs. Newby was matron there at the time.

Do you recollect Mrs. Parke?—Yes, I think I do.

Do you know any thing about her husband?—He is at the White House Bethnal Green, I believe; but he took it into his head that I was intimate with his wife; I did not know the woman, and I was told he came after me with a knife in his hand, and he came to the hospital, and I positively did not know the man; and as to the woman, I never exchanged ten words with her, but once or twice that I saw her with her sister.

How was it that when the Committee first asked you whether you knew a man of the name of Archibald Parke you said that you never knew such a man?—I did not recollect that I did know him, for I never exchanged three words with him.

Do you mean that when the Committee first asked you whether you knew a man of the name of Archibald Parke, that you did not recollect him, but now you acknowledge that it was a man that even threatened your life?—I believe it was; my memory is not so good as it used to be; but if I had met the man in the street I should not have known him.

Did you never see that man while in confinement at Bethnal Green?—I believe went over once for the purpose of seeing him.

Did you speak to him?—I believe I did.

Do you recollect what you said to him?—I asked him how he could think of such a thing as my going after his wife.

Do you recollect saying, "Do you still entertain the same idea that you did before, that I was in love with your wife," or something of that sort?—I very likely might.

Do you recollect what he answered?—No, I do not.

Do you recollect what you said afterwards, just before you went away, did you make no remark?—Yes, I think I said, "You are in a very proper place and I shall not run the risk of my life if you are not confined here."

Do not you recollect that you asked him whether he still continued jealous of you, and the man said, "Yes;" and upon that you said, "You are in a very proper place?"—I believe it was; if I recollect right the man said, "I believe it, and I would say so if it hanged me."

Can you tell the Committee what you said to him in answer to that?—I believe I made some answer to this effect; that he was in a very proper place, and that if he was at large I should not think myself safe.

Do not you recollect saying to him that you should take care that he was kept there?—I recollect saying, that if he was not kept there I should swear my life against him.

Did not you say that he should remain there?—I cannot tell.

You said that the man ran after you with a knife?—I was not at home, I did not see it; but the matron of the hospital told me that he went all round the house looking after me with a knife in his hand.

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What step did you take upon that?—I did not take any step in particular, because I heard his wife had put him into Warburton's.

Then he was in Warburton's before you thought of doing anything at all?—Yes, before I knew any thing about it.

How did you learn that he was in Warburton's establishment?—I believe his sister told me.

After having heard of this attack that he wanted to make upon you, did you ever make any inquiries about him?—Nothing more than that she said he was there.

Which of the matrons told you that?—Mrs. Whidgin.

Were you often in the Lying-in Hospital?—In Mrs. Newby's lifetime I was frequently.

You never saw Mrs. Parke above once or twice?—I do not think I did above once or twice at that time; and if I had met her I should not have known her.

Do you mean that you never saw Mrs. Parke above once or twice at all?—Yes, many times since; but not before that I did not; I have seen her when she has come to see her sister who was pupil to Mrs. Newby.

Have you seen her frequently since?—No, I have not seen her for a twelve-month; I did not know where she lived, I inquired after her to know where she lived, and her sister went to show me.

Did you ever hear that Parke had made his escape from Mr. Warburton's establishment?—I did.

How did you hear that?—They came and told me.

Upon that did not you direct your keepers to go and assist in taking him?—No.

Do not you know that the keepers from your establishment at Saint Luke's took him again?—I do not know; but I believe they went after him.

Would they have ventured to do so without your order?—I do not know that they would.

Therefore they must have obtained an order from you?—They did not obtain any order from me; I do not believe they took him.

Did not they take him up and carry him to Mr. Warburton's?—Not my men.

It has been stated at Mr. Warburton's that he was brought back there by four men from Saint Luke's?—That is not true; I never let four men out of there at a time.

Supposing any one of them had gone out for the purpose of taking charge of a lunatic and committing him to Mr. Warburton's custody, would not it have been the duty of that keeper to report it to you?—Yes; I dare say he would not go without he did.

Mr. Warburton is a governor of Saint Luke's is not he?—Yes, he is.

Are you proprietor, or have you been proprietor of any places for the reception of lunatics?—Never.

Do you know a house that was occupied by a person of the name of Mary Foulkes?—Yes.

Was that house yours?—It was mine; Mr. Vaux, the surgeon of the hospital, put her there, and he gave her a patient; and whether she had another or two I cannot tell.

Charles Edmunds, called in; and Examined.

Charles Edmunds.

HOW long have you been in the White House as a patient?—I have been there nine years last 17th of January.

What has been your chief employment there?—I have been drying the clothes in general.

Is not that sometimes extremely hot, on account of the steam?—Very hot, and very disagreeable.

Do not you assist the cook sometimes?—I generally carve for him at dinner time.

And do a good deal of work about the house?—Nothing but that.

What do you do in the drying room?—I keep the fire and dry the clothes.

Have you seen any of your friends and relations lately?—I saw my brother about three months ago.

Did he talk of taking you out?—He said he should before it was long; I asked him for what reason I was kept in there, and he did not know.

Has he been in the habit of coming to see you from time to time?—Yes, generally every year, twice a year.

Wen he came did you see him alone?—No, not alone; they were in the room with me.

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You never saw him alone?—No; they never allow us to see anybody alone.

Why will not they allow you?—Mr. Jennings would give no reason; I asked him yesterday, when the gentlemen came, and he said it was a thing he did not allow.

Did you ever express a wish to see your brother alone and was refused?—No, I never asked him to do it.

Why did not you ask him?—I did not care, I had nothing particular to say to him, only about my going out.

Did you ever write to him?—Yes, two or three times.

Did he receive your letters?—I never had an answer; I do not know whether he received my letter.

Did you ever ask him whether he received it?—Yes.

Did you ever allude to it when you have seen him?—I think I did once; I think he said he had had one.

Did you ever receive one from him?—No.

Did you ever speak to the commissioners when they came to inspect?—Not to the College of Physicians; there are so many people talking to them that they do not listen to any one in particular; and I could not see any use in it, for the others never got any redress.

Have you ever been sick since you have been there?—No.

Have you ever had any medicine given to you?—I had some medicine; I had a kick in my leg, and I am forced to wear a different kind of stocking.

Did they ever confine you in a crib-room?—No.

Were you ever in the crib-rooms?—Yes.

Did you ever see them on a Sunday?—Yes; they used to be there on a Sunday always; they are kept there all Sunday.

Are they generally kept there from Saturday night to Monday morning?—Yes.

They are not so now?—No; Lord Seymour came there, and he altered that about three or four months ago.

When they were kept there were they always kept the whole of Sunday?—They were always kept the whole of Sunday.

You never saw them taken up to be washed on the Sunday morning?—No; I believe they never were.

Were they shockingly dirty at times?—Yes, their blankets were in the morning.

Is it not your own wish to stay any longer in Mr. Warburton's establishment; you are not paid as a servant, are you?—No.

You would be glad to get out?—Yes.

How is it that you cannot get out; do you think that Mr. Jennings wants to keep you there?—Yes; I think I am too useful.

You do a great deal of work do you?—I carve for four or five hundred people.

How many keepers are there now to attend upon the pauper patients?—Five, I believe.

Have there always been as many?—No, there used to be two.

Used there to be anybody but Dolby and Barnard?—Dolby and Barnard; now they have got three more besides.

How long have they been there?—One about seven months, one about three months, and the other not so long.

Do you know whether those people that were taken up on the Monday morning were ever washed in warm water?—Sometimes some of them might be, and some not, but very seldom.

Did you ever see them taken up on the Monday morning?—It is a thing that I do not much admire; it is nauseous. I would not do it for a guinea a week.

Did you ever go into the infirmary?—Yes; that is wonderfully altered to what it was.

How long has that been altered?—I forget who made the alteration; but it is now very comfortable.

Used it to be very bad?—It used to be very nasty; there used to be very uncomfortable smells.

Did all the people have nearly the same food to eat?—Yes.

When some persons were a little sickly or weak, had they better food?—They had broth at eleven o'clock.

Have you ever had any sago or arrow root?—No.

Did you ever see any given to the other patients?—No; there might have been, but I never saw it; I cannot say particularly about that.

Do you recollect a man of the name of Archibald Parke?—Yes.

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He was a quiet sort of a man, was not he?—A very good quiet man.

Did not they always chain him?—He was chained for getting out.

He was there for the last six years, was not he?—He was there five or six years; he got out once or twice, and he was brought back again.

Do you consider he was of sound mind?—Yes; he was sound as any man in England.

Do you recollect who he was brought back by?—I think Dolby brought him back the last time.

Do you recollect who brought him back the first time?—I do not recollect; Parke is a very civil steady kind of man.

Who were you sent by?—My relations, I believe; but I do not know.

You say you never saw your brother alone; do you think, if you had seen him alone, you would have told him some things you did not tell him?—No; I never experienced any ill treatment.

Have you ever seen the patients chained for having spoken too freely?—Yes, I have seen that; I have seen them chained for nonsense, and handcuffed.

Did they give you anything unusual to drink or to eat yesterday before the gentlemen saw you?—No, I had nothing at all yesterday; I had just done carving.

Would not the patients be afraid to speak their minds before the keepers?—Some of them may; I am not afraid of any of them.

Did you know a man of the name of Nettle?—Yes.

He was confined a long time as a crib patient, was not he?—I think not.

He used to clean the windows?—Yes, and clean the rooms.

Was he a quiet good sort of man?—Yes.

Would you believe anything that he said to you?—Yes, I believe I would, except about his wife; I think he used to talk erroneous about his wife; his wife is dead.

Did you know a man of the name of Solomon?—Yes.

Was he quite quiet all the time he was there?—He was a very steady civil man.

Did you see him when he was first brought to the establishment?—Yes.

Did you consider him to be of sound mind when he was first brought there?—Yes, I thought him a great deal sounder than those that sent him.

Why would not Mr. Jennings let the gentlemen have a few minutes conversation with you yesterday?—I cannot tell; I think he must have been afraid of something that he has done; I am not.

How often do you see Mr. Jennings in the course of a day?—Two or three times a week, not oftener; that is according as it happens.

Does he go round the house every day?—Round the house he may; but he does not come into our yard every day; he does more latterly than he did formerly.

What sort of meat have you?—Generally clods and stickings.

Is it not sometimes that nasty thick hard muscle that a dog could not eat?—Yes.

Have you access to every part of the establishment?—I have; but the others have not. I can have the key, and go round any part of the house.

Do you perform any other services than that of carving?—Carving, and drying the linen and blankets.

Are you under any restraint in the establishment?—Not at all.

How long have you been treated in the way in which you are now treated?—Ever since I have been there.

You never were subject to more restraint than you are at the present moment?—No; they put me in handcuffs at first when I came, but they had no more reason for it than they have now.

How many hours a day are you engaged in the drying room?—From the time I get up till the time I go to bed.

Is anybody else in the room with you?—I attend to the fire, to get the things dry for the evening.

Nobody attends to it but you?—No.

Do you recollect Parke being unwell, and getting rather thin, because he refused his food, it being so bad that he could not eat it?—Yes.

Do you remember their telling him, in consequence, that he should take a certain quantity of physic?—I cannot say as to that.

Did you ever see any patients beat?—I have, when they have been irritable, and some of them are spiteful; then it is very right to chastise them in a moderate way, because some of them are very vicious.

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You never saw any cruel treatment?—Not lately; it is greatly altered; it is not like the same place that it used to be.

Do you mean since Lord Robert Seymour's visit?—Yes.

Two or three years ago used they to use the broomstick repeatedly?—About three or four years ago they used.

Have you ever seen the strap used?—Yes, that will not hurt; that is mere chastising.

Where do you come from?—I come from Chichester.

Did you ever apply to the medical gentleman of the establishment for your release?—No.

Did you ever speak to Mr. Dunston?—No.

Thomas Dolby, called in; and Examined.

HOW long have you been a keeper at Mr. Warburton's?—I have been there nineteen years and better.

Thomas Dolby.

Have you had Barnard for your assistant?—Yes.

Till within these last twelve months had you anybody but Barnard to assist you with the pauper lunatics?—Yes, we had one or two, but they did not stop long; we have had them backwards and forwards.

Generally speaking, you and Barnard have had the management of all the pauper lunatics?—Yes.

You had Sharp to assist you for a short time?—Yes.

And you had Essex?—Yes.

Before they came to you was there any body but you and Barnard to take care of them?—For a little while we were the whole managers of it.

Now there are five of you?—Yes.

How long have you had the other three?—Since Sharp went, directly Sharp went away.

You are in the habit always of keeping the crib patients in their cribs from Saturday night till Monday morning?—No, not now; if they were bad we were obliged to keep them in bed; but they are always attended to and shifted both at breakfast and dinner.

Do not you know that the crib patients were put to bed on a Saturday night and left there till Monday morning?—Not all of them.

A great part of them?—Those that were very bad.

How many were ever taken up on a Sunday morning?—I cannot say how many.

Do you think five out of the whole number were ever taken up on a Sunday morning?—Four or five.

How many were confined from the Saturday to the Monday, forty?—Not so many as that.

Thirty-five?—I dare say there were thirty or thirty-five.

Can you undertake to say, that four of those thirty or thirty-five were ever taken up to be washed and cleansed on a Sunday morning?—Yes; they were always attended to and cleaned and washed every Sunday, those that were so dirty.

Were they taken out of their cribs and washed?—Yes; they had a fresh bed made for them, that I am certain of, because I have done it myself.

You said there were about thirty or forty crib patients, and you have been asked how many of those were taken up, and you say four or five, and those were washed?—Not those that were got up, because they did not want washing, but those that were dirty.

But they were not all washed?—No, they did not want it.

So that there were some that remained chained down that were neither washed nor taken up?—They did not want it.

Are you acquainted with the last witness, Charles Edmunds?—Yes.

How long has he been in the establishment?—He was in Saint Luke's a twelve-month before he came to us, and a very lost patient he was, and a very dangerous one; but lately he has got better, but he has fits at times.

Has he had a fit within the last three years?—Yes, he has had a fit within the last week.

Is he under any restraint in that establishment?—No, he is left to go about the house wherever he chuses.

How long has he been left at liberty in that way?—I cannot say how many

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years, but it has been so a good while; but he was very bad when he came to us first, we were obliged to confine him.

As a crib patient?—Yes.

Those that are transferred from Saint Luke's after a year's probation are transferred as incurables, are they not?—Yes.

Has that man made any application to be discharged to your knowledge?—Not to my knowledge, only to his friends; he has some very good friends come to see him.

Have they property?—I believe they have.

Do you consider that he is now cured of the mental disease?—I do not think he is; he is still insane, but he is very steady to what he was.

Are you now obliged to subject him to any restraint?—Not lately.

How long back was it that he was subject to any restraint?—I think it was four or five years.

In what respect is he insane?—He is subject to fits; he has lost the use of one arm by epileptic fits.

Is that the only reason you have for keeping him?—We do not consider him right, because when one of the fits comes on him he will be quite lost.

How long do those fits last?—Sometimes a day, and sometimes two or three hours, just as it happens.

When he has recovered from those fits he is in his senses?—He is much the same then as you see him now; he is not mad.

Is there any subject upon which if you were to talk to him he would fly out?—No.

Then he is never mad except when under an attack of epilepsy?—He has been worse than he is now.

Is he ever mad now except when he is suffering under one of those fits?—He is always in a little lost state.

Have you any other patients of the same description in your house, that are perfectly in their senses except when they are under the influence of fits?—I do not consider there is any one of them in their senses; those fits keep them so that they are not themselves.

Have you any other patients that are of the same description as the man that has been here to-day?—Yes, we have some.

Do you consider that you are justified in keeping persons as lunatics who are sane, except when they are under the influence of fits?—That I cannot say; I have nothing to do with that.

Do you know a patient of the name of Parke?—Yes.

What sort of patient was he?—A very troublesome one; sometimes I went to fetch him from his house; he threatened Mr. Dunston with a knife; he bought a new knife; he was rather jealous of his wife.

Was he a violent patient?—Yes; when he came he only tried to get away.

How was he troublesome?—He wanted to get away to go to his wife to do her mischief, and likewise Mr. Dunston, and we were forced to keep him confined.

Was not it the fact that you wanted him to do a little work now and then?—No, he never did; he escaped twice.

Who was he brought back by?—He was brought back by the keepers of Saint Luke's.

Do you remember how many keepers there were to bring him back?—No; I know there are two or three of them.

Did Mr. Dunston ever visit him to your knowledge while he was in your establishment?—No, I do not recollect that he did.

Did Dr. Dunston ever see him?—Yes, every time he came.

Did Dr. Dunston ever talk to him?—Yes, several times.

How came he to be let out at last?—I cannot say.

By whose order was it?—I do not know.

Did you chain him?—We used to lock him by his hands in bed.

Do you mean to say, that you never leg-locked him?—Yes.

Why did you do that?—To keep him from escaping; his wife blamed us for letting him escape.

Did his wife ever visit him?—His daughters used to come and visit him; his wife dare not come.

What was Mr. Jennings's opinion of his sanity at the time he was released?—That I cannot say.

Did

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Thomas Dolby.

Did you ever see Mrs. Parke?—Yes, when he escaped; I let her know, and she seemed to be very anxious.

Did she seem very anxious about her husband's welfare?—Yes; she said she durst not trust him to live with her.

Has there been any alteration of late in the system of management at Mr. Warburton's?—No.

Is it just the same as it was this time twelvemonth?—Yes; we do the best we can.

Has there been no alteration of late with regard to the treatment of the patients?—No.

Do you mean to say there has been no alteration in the establishment at Mr. Warburton's since this time twelvemonth?—No.

The crib patients are not now confined all day on Sunday?—They are not; but there is no alteration with regard to their treatment.

Is not that an alteration with regard to their treatment?—Yes, in that respect.

Do you mean to say, that there have been no additional washings and no better food?—No better food, I am certain of it.

Are there no more keepers than there were?—There are five of us now; there is an alteration there.

Has there been any alteration in the food?—The food is just the same as it was, and I never knew it otherwise; it is very good.

Do you mean to say, that there is no alteration in the infirmary from what it was this time last year?—No; it is kept clean, and it always was kept clean.

(A Member of the Committee delivered in certain papers, which will be found in the Appendix, ante, pp. 9-12.)

Jovis, 28^o die Junii, 1827.

ROBERT GORDON, ESQUIRE,

IN THE CHAIR.

Mr. John Massendine Camplin, called in; and Examined.

WERE you in partnership with Mr. Jones in 1821?—I was.

Do you recollect visiting a man of the name of Archibald Parke, who lived in Old-street Road?—No, I do not; I recollect attending children at his house. I have referred to the books, and I do not find that I visited him.

Mr. Jones stated that you visited him oftener than he did?—I attended the family oftener than he did; I find, upon looking at the books, that I visited five or six times to his visiting once; but it appears that he visited the man when he was ill, and prescribed for him, and I did not visit him at all.

Have you any papers with you by which you can prove how often either you or your partner had visited this patient before you signed the certificate?—I do not know that he visited him more than once or twice; I did not visit him at all; but I recollect to have heard of his insanity, both before and after he was sent to the White House.

What number of visits did that individual receive either from you or your partner previous to signing the certificate?—He was prescribed for only once, and at this distance of time, I cannot say exactly how many times he was visited.

Have you any record of what medicine you gave him?—Yes.

What was the nature of that medicine?—It was of a purgative kind, followed by a saline medicine.

Then the Committee are to understand, that you only visited him once?—I cannot say; at that time we had eighty patients on the list, and our business has increased since.

Then after having prescribed for the man only once, the certificate was signed by Mr. Jones, by which he was committed to the White House?—Yes.

Do you keep a regular account of the visits you pay?—Yes; but the family were some of them ill, and I am not certain that he might not have been seen at that time.

Mr.
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J. M. Camplin.

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Are you quite sure that you never visited him yourself?—I am not quite sure; I do not think that I did: I have an indistinct idea of having seen the man, and that he was in a mulish sulky state, and would not give any account of himself; but whether I saw him or heard a description of him, I cannot say.

You cannot state the circumstances that operated upon your partner's mind to induce him to sign the certificate?—I think the circumstance was that some act of very great violence was apprehended; I think he had threatened the life of his wife, or some individual of the family.

You learned that from the representation of others?—Yes; we might have learned that from others, but I am sure we should not sign the certificate without seeing the patient, and examining him for ourselves; of course we hear what the patient has been doing from the friends.

Are you competent to speak as to his state at the time the certificate was signed?—No, I am not.

All you know is, that your partner prescribed once for him?—Yes; I understand that it was thought extraordinary that we did not subsequently visit him after his being confined, and I think there was a circumstance that may be mentioned that will explain that at once, which is, that there is a medical man regularly attends the whole of the inmates of this particular asylum to which he was sent; now in many of the asylums the medical man who has been in the habit of attending each patient continues to attend that patient; we have patients now that have been in an asylum for nine or ten years; we were consulted when they were first sent in, and we are occasionally consulted now.

Do you consider that a single inspection of an individual is a sufficient justification to any medical man to sign a certificate of insanity?—It depends upon the circumstances that take place at that visit entirely; a man may be in so complete a state of insanity as to be seen to be such at once.

Have you any recollection of Parke being in such a state?—I have not any recollection myself, because I did not visit him.

Has not it often fallen under your observation that a person under the influence of liquor, or under some paroxysm of fever or of passion, might, for a moment or for several days, have the appearance of insanity without being deranged in mind?—I think that a person under such circumstances might be considered as insane, and sent to an asylum with perfect propriety; but then he could not be detained in that asylum with propriety.

If a man is furious from any of the causes that have been mentioned, or from having had an epileptic fit, would you think that a sufficient ground for confining him to a madhouse, without inquiry?—No; I am very sure that what was done at that time was done with propriety and with great caution, because my partner is extremely cautious; I have thought him unnecessarily particular in some cases, where the insanity was so notorious that it was as plain as the sun.

Your partner, Mr. Jones, stated that he kept so regular an account of his receipts that you would be able to state the exact sum that was paid for the signing of that certificate?—We have consulted the book, and there is no fee paid.

Are there any fees for visits?—No; there is a little charge for medicine, and no charge beyond that.

Does that charge appear to have been paid?—I do not think that it was; there is no mention of it made in the cash book; certainly there was nothing like a fee paid, and it must appear plain to the Committee that it was very much against our interest to send him to a place of that kind at all, where he would be immediately out of our hands as a patient, and we should have no advantage from his going whatever, so that we must be clear from any imputation of having acted improperly.

Archibald Parke, called in and Examined.

Archibald Parke.

YOU were in Mr. Warburton's establishment for some time?—I was two days at the establishment at Hoxton.

You were removed from thence?—Yes, and sent to the White House.

How were you removed?—They sent a keeper for me from the White House.

He brought a strait waistcoat, did not he?—He did.

Did the keeper of the house at Hoxton make any remark upon that?—Yes, he did; he told him that they had no occasion for a strait waistcoat, for that I had been only drinking a little, and that I was very quiet all the time I was there, and that he

he did not think I should have any necessity to be long in an asylum; I was there from one o'clock on Sunday till Tuesday about ten o'clock.

When was that?—In April 1821.

You were removed from thence and placed in the White House?—Yes, on the 22d of April.

Were you put in irons as soon as you got to the White House?—No.

You were on the gentlemen's side of the establishment at first, were not you?—I was on the gentlemen's side for four or five months.

While you were on that side you were not in irons?—No.

Afterwards you were put among the paupers?—Yes.

When was it they first put you in irons, was it after you attempted to make your escape?—Yes.

You were not put in irons till after you attempted to make your escape?—No, I was assisting the head keeper on the gentlemen's side to shave some of the gentlemen there when I went in first.

How long had you been in the establishment before they gave you razors and desired you to shave people?—I suppose I was about five or six weeks there.

Were you employed in that office for some time?—I was employed till I made my escape.

How were you occupied before you made your escape?—I was shaving up to the time that I made my escape.

Where did you go to when you made your escape, did you go home to your wife?—No, I did not; I worked at Mr. Watson's the upholsterer's for about three years, and there was one of the cabinet makers there, whose wife and he both worked in the shop, and I lodged with him.

While you were lodging with him, you went and called upon your wife?—Yes, the very day that I was taken back.

How long had you been out before you called upon your wife?—The 24th of February I made my escape, and the 24th of March they took me back again.

How came you to call upon your wife?—I was going to sea; I had bespoke a ship, and I called to bid the children good bye, and while I was doing that they sent over to my sister-in-law, the matron of the Lying-in Hospital in the City-road, and they went the back way and informed Mr. Dunston, and he sent four keepers to take me.

Did the person you lodged with at Westminster allow you to walk about by yourself?—They never controlled me, nor detained me.

How did you support yourself while you were living at Westminster?—I had a few jobs in the upholstery line from the cabinet maker.

Why was it, that you being an upholsterer, determined to go to sea?—To be out of their way; that I should not be sent to an asylum again.

Then it was while you were calling at your house, that you were taken hold of by the keepers?—Yes; my son came out and went a little way from the house, and I went to him and spoke to him, and at the time that I was speaking to him, they sent four of the keepers from Saint Luke's, and they seized upon me.

You are sure they were keepers from Saint Luke's?—Yes, I am sure they were keepers from Saint Luke's; they sent to Saint Luke's the back way.

Did those keepers search your person when they seized you?—No.

What happened when you were carried back to the White House; did they search your pockets for money?—The money was taken from me about a twelvemonth before that; they did not search my pockets at that time.

When you got back to the establishment, did they put you in irons?—They put me in irons directly.

Can you tell what the irons were?—They weighed about three pounds and a half.

Had you any irons on your legs?—Not in the day time; I was confined to the handcuffs.

Were your hands chained down?—A chain was round my waist, and the chain was through my handcuffs and confined my hands within about four inches of my body; and the handcuffs were about four inches from one another.

Were your legs locked at night?—I had a chain upon my leg from eighteen to twenty pounds weight.

Was it fastened to the bed?—Fastened to the frame of the bed, and then I had a chain to the other side of the bed, and locked with my handcuffs also.

Did you ever see Mr. Dunston while you were there?—Yes, several times.

The old gentleman?—The old gentleman came once.

He was not in the habit of coming, was he?—Not that I saw.

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He came to see you?—Yes, he and Mr. Tow his assistant, they came one day to see me; I suppose I had been there six or eight weeks.

Was it after you were confined the second time?—No, the first time.

What did he say to you?—He asked me if I was jealous of my wife with him; I told him right down that I was, and he said, "Why." "Because I have reasons for it," says I. Then I told him a circumstance, and he turned round and walked off, and he had no more conversation with me.

Did he say anything more as to your remaining in the White House, when you told him you were jealous?—No.

Did not he say, "Then you shall remain here?"—No, he did not tell me so; but I look upon it that it was upon that account that I remained.

Did your wife ever call upon you while you were in the establishment?—I have never seen her for above six years.

Did she ever write to you?—No; she sent me some clothes.

Did you see your children occasionally?—I saw them at different times.

Were you ever allowed to see them in private?—No; the keeper was always present, always standing close by; I could not say a word but in his hearing.

Did you feel that you were at liberty to say what you liked before the keeper; if you had any complaint to make about the establishment, would you have ventured to do so before the keeper?—Not unless I wanted extra punishment.

You conceive, that if you had made any complaint, you would have received some punishment?—Yes, I would.

What punishment?—Perhaps to be locked by the leg for a day or two.

Have you ever seen patients punished for making complaints in that way?—Frequently.

You know there are certain physicians that visit the patients occasionally?—Yes, there are six of them.

Did you ever make any complaint to them?—No.

Why did you not?—I saw several of them that made complaints, but they took no notice of them; they walked round the yard, and they did not want to have any body speak to them.

Had you ever an opportunity of speaking to Mr. Warburton; did he come to talk to you?—No.

Did he ever ask you any question as to your health?—He never asked me any question whatever.

Did you ever speak to Doctor Warburton?—No.

Why did not you?—I spoke to Lord Seymour.

Why did not you speak to Doctor Warburton?—He does not want to talk to any of the patients; they come into the ground, and walk round the yard, and go out as soon as possible.

Did you mean, that you had no opportunity of speaking to him?—I might have an opportunity, but I knew that it was to no purpose; he never liberates any body, as long as he can detain them.

How often in the course of a week did you see Mr. Jennings?—Since Lord Seymour and some of the gentlemen that were along with him, and Lord Calthorpe came, he has visited us two or three times a day, perhaps; and before that time, sometimes once in two or three days.

Did you ever express a wish to any of your children or relations, that you should be let out?—Yes, frequently.

What did they say?—They said they would tell their mother.

Was your daughter anxious that you should be liberated?—She considered there was nothing the matter with me.

Did they ever send you any medicine or physic?—Yes; I had physic four times during the six years, and two of those times I asked for it myself.

Did you want it at other times?—No.

Did the medical man who was attending the establishment often see you with a view to examine into the state of your health?—They never made any inquiry after me, no further than when you make a complaint to the keeper that you want so and so, then he informs the medical man.

Do you mean, that the medical gentleman never comes to the patients unless the keeper, Mr. Barnard, brings them into the room?—No.

So that those gentlemen do not walk round the establishment and speak to the patients themselves, with a view of ascertaining the state of their health?—No, nothing of the kind.

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They leave it all to the judgment of the keeper?—Yes.

Did they ever give you any sort of food better than the common diet that the other patients had?—No.

Have you ever seen a sick diet given to pauper patients?—I have seen a little hot water given to them, which they call soup.

Have you ever seen sago or arrow root given?—No; I have seen wine and water when a man was almost expired, when he could not drink it.

But never in any other case?—No.

Did you ever go into the infirmary?—Yes.

What sort of state was it in?—It is in a very good state now.

How was it a twelve-month ago, before the magistrates went?—In a very horrid state.

Do you recollect the gentlemen from Mary-le-bone parish coming and looking at the infirmary, and finding it out?—I do perfectly well; they came into the room and went straight through the room, and right up to the infirmary.

Was it in a very bad state before that?—Very bad indeed, and it was in a very bad state at that time.

Did you ever tell Mr. Jennings or Mr. Dunston that you thought you were fit to go out?—No.

Did Mr. Jennings ever say anything about continuing to keep you at the White House, or about letting you go?—No, never.

Have you ever applied to him to release you?—No; because I knew it was of no use, because they wished to keep me in.

Why do you think they wished to keep you in?—Because the profits are so great.

How much did you pay a week?—I understood that there was 10 s. paid for me.

Do you think the profits were very great upon 10 s. a week?—Yes.

How do you make out that?—There were several of us that reckoned every thing together, and we made out that the provision cost about 2 s. 4 d. a week per head, and then there is washing and bedding.

What sort of food had you in the establishment?—We had necks of beef, and they send that to the oven and bake it, and then it comes out and a small portion is put in each plate; it is more to be compared to a piece of Indian rubber than to meat, it almost drags their teeth out of their heads.

Could you eat it?—No, I never did eat any of it; those men that work extra, get what is called an extra dinner, and sometimes I used to buy a pennyworth from them, because they had good meat for their dinners.

What sort of bread had you?—The bread was the best kind of victuals that we had there; the bread was pretty well.

Was there great difference between the food that you had when you were on the gentlemen's side, and what you had when you were on the pauper side?—A great deal of difference; they do not gain so much by the gentlemen as they gain by the paupers, for their victuals are so much superior, and their accommodations are so much better.

Were you acquainted with a Captain Leith in the establishment?—Yes.

How long had he been in the establishment?—I suppose about fifteen or sixteen months; Captain Leith used to apply to Mr. Warburton, and also to young Warburton, and to Mr. Jennings, and all the redress that he got was, that they told him he was in a very irritable state, and that he was not fit to be at liberty.

After those sixteen months, was he removed to an establishment at Portsmouth?—He applied to his agent, and he got him removed to an establishment at Portsmouth.

How long did he remain there?—He was about a fortnight there and then he was discharged cured.

What was your impression of Captain Leith while he was there?—I considered the man to be quite in a sane state as any man would wish to be.

Was it to Haslar Hospital that he was removed to at Portsmouth?—Yes.

Did he ever state to you whether he had opportunities of communicating with his friends while he was at Mr. Warburton's?—He told me a little time before he went out, that he wrote ten letters to two different gentlemen, and not one of them went; and his agent came the next week, and he told his agent to be so good as to send one of those two gentlemen, and the gentleman came the next day and he found he had never received one of them.

Did you ever write to your friends while you were in the establishment?—No further than for a few clothes.

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Was not Captain Leith a very generous good sort of man?—He was a very hospitable man, he used to give me money when he and I were on the gentlemen's side, and then when I went over on the pauper side he allowed me a shilling a week; Mr. Jennings stopped that and gave me tobacco and snuff in the room of it, and it was not fit to use.

Did you ever see any of the patients beat?—I have seen them beat in such a manner that they have died in two or three days afterwards.

Who were they beat by?—By the keepers, and by some of those patients who assisted them.

How many keepers were there while you were there for the paupers?—There were two keepers only.

Sometimes you had Cooper the groom to help, had not you?—It was very seldom he helped.

Do you remember Sharp coming?—He was there about two or three months.

Before Sharp came, were there ever more than three keepers?—No; in the room that Sharp was employed in there is one of the paupers that did that business for about four years, and now they have got an extra man that does it, and so they do it between them now.

You were never in a crib were you?—I never was put as a patient in a crib, but I have been in the crib-rooms.

Were they kept there all day Sunday?—They were kept all day Sunday; they were put in in the winter time about four o'clock on the Saturday evening, and they were taken out about eight o'clock on Monday morning.

Did you ever go in and see them there on a Sunday?—Yes; the door was open to any person to see.

And any body might go in to see them that liked?—The room was divided in two, and there was one of the halves for the people to mess in, and the other half was a crib-room, and there was a door between and that was frequently open.

Did you ever see them taken up to be washed on a Monday morning?—Frequently.

Were they rather dirty?—They were in a dirty state; they used to have physic on a Saturday, when they used to go to bed, and they used to be lying in it all day, more like pigs than christians.

Did you ever see them taken up on a Sunday morning to be washed?—Yes; within these six weeks or two months before I left, they were taken up every Sunday morning.

Before last Christmas were they ever taken up on a Sunday morning?—No; I never saw them, unless it was a man that was expiring.

Do you believe they were ever taken up on a Sunday morning to be washed?—No, I never saw them before this fresh regulation took place.

Were you ever confined in a crib by way of punishment?—No.

How were they washed?—They were washed in such a manner, that it would make tears come out of any christian's eyes; they were taken to a tub where there is ice in cold frosty weather, and they stand by the side of the tub and are mopped down just the same as if they were mopping an animal.

Did you ever see them washed in warm water?—Yes; I have seen them washed with warm water, those who had almost departed this life.

You have said, that after you made your first escape, and before you were seized, you made preparations for going to sea, did you mean to go as a sailor?—To go as a foremast man.

Had you engaged yourself?—Yes, I had.

Had you ever been to sea before?—I have been at sea many years, both in His Majesty's service and in the mercantile service.

When was it you went to Mr. Jones's?—On the 24th of March 1824.

Have you not been in May last, since you came out the last time?—No; I had a certificate from Mr. Starkie about the 15th or 16th of March three years ago, for being in a sane state; he examined me three times, and he found me quite in a sane state.

Who is Mr. Starkie?—A medical man, who lives near Limehouse church.

Did he go there on purpose to see you?—No, I went to his house; that was three years ago last March, when I made my escape; and the certificate I had of him, they took it out of my pocket when I went back, and I went to Mr. Starkie, and he has gone to reside in Yorkshire, or else I would have got a copy of it.

Mrs. Mary

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Mrs. *Mary Parke*, called in ; and Examined.

DID you get a certificate of the insanity of your husband in 1821?—I did.

By whose advice?—By all my friends ; my sons were in the house at the time, and my children ; I have seven.

By what medical advice?—By no medical advice ; I sent for a medical gentleman, and he filled up a certificate.

Who was that?—Mr. Jones, of Finsbury-square.

Had he been in the habit of attending your family?—Yes ; if anything was the matter with my children, I always called him in ; but I never had any great occasion for a medical man.

Do you think he had seen your husband often enough to give a certificate of insanity?—He saw him at the time the certificate was granted ; my son went to Mr. Warburton's madhouse for somebody to come ; we could not do anything with him ; he was then in a state of madness, tearing himself to pieces, and it was as much as both my sons could do to hold him, and my eldest son was obliged to strip himself ; he was tearing his things off his back.

How often did Mr. Jones see him?—He only saw him at the time, and then the keepers came and took him away.

For how long did he see him?—I do not know exactly how long he might be there ; twenty minutes or so ; but my husband had been in a sad state long before that ; but I never concluded that it was madness, I thought it was bad temper.

Then you did not think it was madness till Mr. Jones told you so?—Yes ; my son previous to that went to Mr. Warburton's, to get somebody to come.

Why did you send to Mr. Warburton's, if you thought that his madness proceeded from temper?—My sons did ; I did not know what to do with him ; all his plea was to get at me to do me an injury, as he had done for years before.

Was he very much in the habit of drinking?—I never knew that he drank ; if he did, it was unknown to me ; I had not the least idea that he was given to drinking.

Are you quite sure that he was not drunk at that time?—I did not see the least symptoms of drunkenness upon him ; I saw that his face was of a dreadful complexion ; I saw him through a glass ; my son was securing him in the room ; I saw him through a glass at the top of the door, and I never shall forget it ; no corpse in the world was to equal it, and round his eyes was black ; he was not like a drunken man in the least.

After you sent him to this madhouse, did you ever make any inquiry about his health?—Certainly ; his children saw him repeatedly.

Did you ever go to see him?—I went there, but not to see him, because he never expressed a wish to see me, but always the worst word in his mouth was too good for me ; he always conducted himself in that manner ever since I have had him ; I have been married now thirty-four years, and I can say that not four months out of the time he ever treated me like a wife.

What account have you had of the state of his mind since?—The same.

You thought it was quite sufficient, after having sent your husband to a madhouse, never to go to see him?—I sent my children ; I did not think it was necessary for me to go before him, because I was told it would irritate him.

Did your sons go to see him?—Yes, both sons.

How often?—I cannot say how often ; my eldest son, who is here, used to go frequently to pay the money.

Did he see him?—Yes, and the daughters too.

Your eldest daughter was not living with you?—She was married ; but my little girl, who is about sixteen years of age, frequently went with her.

And she gave you an account of her father's state of mind?—Of course she did.

You sent him first on the gentlemen's side at 15 s. a week?—I did for two years and a half.

And you afterwards reduced it to 9 s.?—Yes.

Was his release owing to your application?—Certainly, it was ; my daughter wished him to be liberated, and so did my son ; and she said she would find a home for him, and that he should not molest me.

Did you think there was danger in having him released?—I do now think that I am in danger if I meet with him.

Is it your opinion, that even at this moment he is exceedingly wild?—I understand from my daughter that anybody talking with him now would think that he was not correct.

Mrs.
Mary Parke.

28 June 1827.

Mrs.
Mary Parke.

28 June 1827.

Was it against Mr. Jennings's advice that he went out?—Yes; Mr. Jennings called upon me a very little time after, and said that.

You are quite sure that he was let out by your advice, and not at Mr. Jennings's?—No, he was let out by my order; Mr. Jennings called upon me to tell me, that he could not liberate him without an order from me, and I sent it.

Did you give a written order?—Yes.

What did Mr. Jennings say?—He said that he could not liberate him without an order from me, and I sent a note to say that I wished Mr. Jennings to liberate him that morning.

Did Mr. Jennings express any opinion upon the subject?—I said to Mr. Jennings "He has this moment gone by, I am frightened to death." He said, "I do not wonder at your being frightened." I said, "Do you think he is any better?" he said, "I do not myself; I think that if it ever was necessary to confine him it is now, for the same principles remain."

Then Mr. Jennings did not state to you that your husband was recovered, and fit to be released?—No, he did not; it was his children that reported it to me.

Why did you send for Mr. Jones to sign the certificate when your husband was so violent, did you know him before?—Certainly I had, having lived so many years close by Mr. Jones.

Did Mr. Dunston know him at all?—Not to my knowledge.

You were not recommended by Mr. Dunston to apply to Mr. Jones?—No, I had never seen Mr. Dunston; and I do not know that I have seen Mr. Dunston half-a-dozen times in the street since my husband has been gone.

Before that had you not seen him?—No, nor before; I never saw Mr. Dunston upon the subject in my life.

During the time that your husband was at Mr. Warburton's, did you ever send any medical man to ascertain his state?—No; I understood I had no occasion to do that.

Having sent your husband to Mr. Warburton's, you neither went to see him yourself, nor ever sent a medical man to look after him?—No; I was told that it was not necessary for me to do so.

Who told you so?—People about.

You never went to see him at the White House, and you never sent a medical man to look at him?—No; I asked Mr. Jennings if there was any occasion for it, Mr. Jennings mentioned something about it, and I said, "Is it necessary to send?" he said, "It is not necessary to send, we have a doctor comes to the house."

Did you ever go to the White House to ask Mr. Jennings how he was?—Yes, I did, many times.

And you were satisfied with what Mr. Jennings said to you?—Yes, I thought it was all right.

Did not some of your children frequently tell you that they thought their father was in a state that it was fit to take him out of the White House?—Lately.

How lately?—A few months ago; I do not suppose it is more than four or five months since it was first mentioned.

Upon their saying that did you make any application to Mr. Jennings about the state of your husband's health?—Yes, I asked Mr. Jennings. Mr. Jennings said I might take him out if I pleased, it was nothing to him, but if he was to speak his mind, that was what he said; and I said, "Do you not think, Sir, he is better?" and he said, "Yes, he is better in some senses, but the principles are just the same."

When you first discovered that your husband was deranged, why did not you send for medical advice for him?—I had not the least idea of it till he went away, and had not he laid violent hands upon himself I should not have thought of sending him to a madhouse.

How came you not to send for medical advice to try what that could do in the first instance?—I never considered before that he was in a state of madness.

Did not you say that you sent to Mr. Warburton's madhouse before you sent to Mr. Jones, the medical man?—Yes, my son went.

How long before your sending for Mr. Jones did you send to Mr. Warburton's madhouse?—A few minutes; when my son went to Mr. Warburton's madhouse he went for a keeper, he did not go to take him away.

Did you send for Mr. Jones for the purpose of signing a certificate, or for the purpose of inquiring into the health of your husband?—To see what he thought of him.

Did

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Did he bring the certificate with him?—No; there was a certificate brought from the house.

Was that brought before Mr. Jones came to you?—Yes.

And then, having got the certificate, you sent for Mr. Jones, as being a medical man competent to sign it?—Yes; I did not know how to proceed.

Are you not aware that persons are sometimes deranged in their minds from fever?—Yes, I know that very well, of course.

Then how could you take upon yourself to send for a certificate to have your husband carried away to a madhouse, when you must have been quite ignorant whether his derangement proceeded from fever or from madness?—I did not send at all; my son went of his own accord.

Did he go without your permission?—Yes; I had not seen him before he went.

Was your husband taken away without your permission; did you object to his being taken away?—No, I did not know what to do with him.

Had your husband any property?—None whatever.

Where did the fifteen shillings a week come from which you paid for his support?—From me.

You are aware that any property you had was the property of your husband?—Yes, I am aware of that; my husband never worked for his family for years, and I have worked and supported his family, and brought them up.

Had you any independent property?—No, I had not; my son boarded and lodged with me, and he allowed me a pound a week, and my business then was tolerably good, and I could afford to pay it out of that; but I had no other resource, nor have I now; it was paid out of my own earnings, and what my son paid for boarding and lodging.

Are you not aware that your husband had some money in a savings bank?—No, it was my money; every halfpenny of it came from me; my husband has never earned his bread for the last fourteen years; I was in the trimming business, and my family; the fancy trimming was very much in fashion, and we have earned as much as 7*l.* a week, and it was my money that was in the savings bank.

Was that lodged in the name of your husband?—It was, because he took it, and I never thought it necessary to have my name along with it.

Was it drawn out afterwards?—Yes, I had got the receipts from Mr. Jennings.

By whom was it drawn out?—By me.

What savings bank was that money lodged in?—In Bishopsgate church-yard.

By whose direction was your husband removed from Mr. Warburton's?—By mine, because I could not afford to pay two guineas a week, and they never take any under that.

Did you not represent to Mr. Jones that your husband was insane?—No, Mr. Jones saw him for himself.

Do you remember your husband calling at your house when he escaped from Mr. Warburton's?—Yes, I do.

Had you previously heard of his making his escape?—Yes.

When you heard of his escape, did you take any steps to ascertain what had become of him?—Yes, I sent for him everywhere where I thought he could be, but I never knew where to send to; he used to go away sometimes for two or three days before he was sent to Mr. Warburton's.

Then sometime after that he called upon you?—Yes.

Did you see him?—No; his little boy, about fourteen years of age, opened the door, and when he found it was his father, he shut it again, and was very much frightened.

What became of your husband?—He was taken again; my son went round to Saint Luke's hospital.

Did you send for a keeper?—No; my son went himself.

Was any inquiry made from any medical man to ascertain whether he was in his senses?—No, I was afraid of him.

Did you hear of his having paid a visit to Mr. Jones at any time?—No.

Then in fact you shut him up again, without knowing whether he was in his senses or not?—I did not consider that he was, when he came with a knife in his hand.

Did your son say that he came with a knife in his hand?—Yes; it was taken from him.

Was it taken out of his pocket?—The knife was open in his hand, and when he came before that time he came with a knife, and my son got it out of his hand; and in getting it out of his hand, he was cut.

Mrs.
Mary Parke.

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How long had you been married before his first removal to Mr. Warburton's house?—That was six years ago; I have been married 34 years.

Had he ever shown any indications of insanity before that?—I do not know what you call insanity; I suppose that man has every now and then taken pints of laudanum, that when he went to Mr. Warburton's, from the crown of his head to the sole of his foot, he had not a free part that was not the same as if he had been stripped and flogged with a cat-o'nine tails with scratching himself, he had taken so much laudanum; and he would have given it to me, if he could.

Was he in that state of body when Mr. Jones saw him?—Yes.

So that Mr. Jones could have seen that he was not in a common state?—Yes; there was the mark of a rope about his neck, he had hung himself.

Did you explain to Mr. Jones, that he had been in the habit of taking laudanum?—Yes, and to other medical gentlemen. He has had things mixed in cups, and he has wanted to force it down my throat, and I have sent it to medical gentlemen to know what it was; and the last time it was sent to some medical gentleman, he said it was enough to kill fifty persons, it was oxalic acid, or something of that sort.

Did you tell Mr. Jones before he signed the certificate, that your husband was in the habit of taking laudanum?—Yes.

And that he had taken it then?—I do not know that he had taken it then; a day or two before.

What quantity of laudanum had he been in the habit of taking?—I do not know what quantity, we found bottles all over the place; at one time I saw him in the act of pouring it out into a spoon in his hand, and I touched his elbow and threw it down; but he was always taking it.

Did he take it medicinally to remove any complaint which he had?—No; to kill himself, he said.

Have you ever heard that he has been in the Mediterranean?—Not since I saw him.

Has he never been at sea since he was married?—Yes.

In what situation?—I believe the last time he went, he went out in an East India-man as quarter master, but he ran away from the ship.

Did you know anything of his intention of going to sea at the time he was taken up and put into Mr. Warburton's house the second time?—No; he said he was going to sea.

Mrs. *Delia Johnson*, called in; and Examined.

Mrs.
Delia Johnson.

MR. Parke is your father?—Yes.

Is he living with you at present?—He is.

Has he been living with you ever since he was released from the White House?—Yes.

Since he has been with you, has he conducted himself in an orderly way?—Yes, he is very quiet.

Would you say that he is in the least dangerous?—Not at all.

Is he perfectly trustworthy?—Quite.

Does his mind wander at all?—Yes, it may wander, I dare say, from his manner; but I do not think he is deranged as many are that were put where he has been.

In what way does his mind wander?—He is very absent.

Is he ever violent?—No.

Is he ever wild?—No.

By wandering, do you mean that he talks nonsense occasionally?—Yes; and he is very absent sometimes.

Does he ever talk incoherently?—No, not at all.

But you do not mind trusting your children under his care?—No; if I was in the least fear, I never would trust him.

Is he in the habit of taking laudanum now?—Not at present, he used frequently.

As a luxury, or as a remedy for disease?—No; he used to get one nonsense or other into his head, and then he would go out for several days, and when he came home we found three or four bottles of laudanum about the house.

Were you ever uneasy at your father being confined in a madhouse?—Yes; that was through the treatment he said that he received.

Did you conceive that he was in a perfectly fit state to come home again?—I understood so.

From whom?—From himself; but Mr. Jennings repeatedly said he was not in a sound state of mind sufficiently to come out.

Were

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Mrs.
Delia Johnson.

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Were you accustomed to visit him often whilst he was at Mr. Warburton's?—I was there several times.

Were you always admitted to see him when you wished it?—Always.

Were you allowed to communicate with him without the presence of a keeper?—No, the keeper was always there.

Had he the power of overhearing what your father said to you?—Yes, always; he always stood in waiting at the door.

From what you saw of your father when you used to visit him, do you conceive that he was in as sound a state as he is now?—Yes, he was always very correct.

Did you ever apply to your mother to allow you to take him out?—Yes, once; but he made so many attempts upon her life that I do not wonder at her being backward to release him.

How came she to let him out at last?—I hardly know what was the reason; he made a great deal of profession, and he said he would not hurt her at all if she let him out, and he begged so hard that I fancy that was the reason.

Had it become inconvenient to keep him there?—Yes; the expense mounted up very fast; but not so much so but what my mother could have paid for him; but that was the chief reason.

In what way did he make an attempt upon her life?—In every way; he used to ask her to take a walk in the evening, and one evening he had got a piece of rope in his pocket, and as they were walking by a ditch he attempted to tie himself and her together. Certainly I think he must have been deranged at times, morally deranged; and it was the same with respect to me, he is very different to what he used to be; he used to hate the sight of me; I have received as bad treatment as any body, but still he was my father, and I pitied him as such; and they certainly tortured him wantonly at the White House, in a number of ways that there was not the least occasion for.

How did they torture him?—They leg-locked him, and punished him in various ways; they put a chain round his body.

Do you think his health suffered from the treatment he received there?—Yes, materially; his eyes were very much injured.

Has he recovered yet?—No; he cannot take a drop of liquor or porter upon that account, it flies to his eyes.

Was that from the coldness of the iron?—I believe it was.

Do you know anything of this from your own knowledge?—He told me this repeatedly before the keeper.

And the keeper did not contradict it?—No.

Have you seen him in irons when you have gone there?—No; they have been always taken off before he came into the room.

Did you see his wrists?—Yes; he always showed me them in particular.

Were they marked?—Certainly they were.

Did you ever express a wish to see him alone without the keeper?—Yes, but I never could; the keeper might have gone out of the room for a few minutes if he had chosen to do so; I have hinted as much.

Did you ever ask him distinctly to go out?—No.

You were not afraid of seeing your father alone at that time?—No.

You stated that he had treated you with unkindness as well as your mother?—Yes, all of us, as well as my mother.

What used he to do; did he ever make any attempt upon your life, or any attempt of violence?—Yes; I have suffered very much indeed from his treatment, with a strap and cane, and every thing else.

Was that continued for many years before he was sent to Mr. Warburton's?—Yes, till I was married; that was the reason I was married in so great a hurry as I was.

Were you married before he went to Mr. Warburton's?—Yes.

Were you present at the time of his being sent to Mr. Warburton's?—No, I was not.

How soon did you see him after he was confined?—I do not think I saw him till a month or two after.

How was he then in his mind; did he seem quiet?—Yes; the short time I was with him I did not see anything the matter with him; I was rather in fear of being alone with him, but I do not know what state of mind he was in, but I thought he seemed very collected.

Why do you think he took such a dislike to you?—I always took my mother's part.

Mrs.
Delia Johnson.

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You say that he used to ill-treat his family before he went to Mr. Warburton's; did he do so regularly, or was it only occasionally?—Occasionally.

What was his habit at other times, was he quiet?—Not very quiet; he was never very quiet; he could not bear to be crossed in the least.

At what time did you begin to think he was well enough to be let out?—Very lately.

Did you ever see the meat going into Mr. Warburton's?—Yes; once in particular.

Was it good or not?—It was shocking; it was not fit for dogs to eat.

Did you see your father when he escaped?—I saw him once; he knocked at my mother's door, I was in the house, I scarcely had a glimpse of him, and I cannot form any idea of his state at that time.

Had he a knife in his hand at that time?—Not at that time I believe.

Did it appear that he had a knife afterwards?—When he was taken he had.

Was it in his hand?—I believe not; I believe they took it out of his waistcoat pocket.

You did not hear that he came with an open knife to the door of your mother's house?—No.

Do you suppose that he drew his knife to resist being taken by the keepers?—Yes, he said he would defend his liberty.

And it was upon that occasion that he took it out?—If he took it out it was upon that occasion.

Did he tell you about his visit to Mr. Jones?—Yes.

Was it principally upon the subject of your mother, and when your mother was mentioned or alluded to that he was violent?—It was.

Was it only upon that subject?—Only upon that.

You are taking care of him now, are you not?—Yes.

Is his conduct better now than it used to be?—Yes, he is very quiet at present.

Does he take any laudanum now?—No.

Have you any reason to suppose that he used to drink?—Yes, I know that he used, I could smell the spirits.

Do you believe that he drinks now?—No; if his inclination led that way he could not take it on account of his eyes, his sight becomes very bad.

Has he the means of drinking; has he money?—No; his money was taken from him very illegally, I think, by Mr. Jennings, 4*l.* that he had given him by Captain Leith, who was confined there at the time that he was there.

Was it taken away by Mr. Jennings and kept?—Yes; but he gave it in part payment to my mother, but I think it belonged to my father; Mr. Jennings I think ought not to have done so.

Is your father now quiet when Mrs. Parke's name is mentioned; does he speak of her with irritation?—Not at all.

Is his tone altered upon that subject?—Yes, it is.

Lord Ashley, a Member of the Committee; Examined.

Lord Ashley.

THE Committee understand that your lordship visited Mr. Warburton's establishment the day before yesterday, in company with Mr. Lennard, for the purpose of making inquiries with reference to the case of Parke, which has been examined into by the Committee?—I did.

What did your lordship understand to be the reasons which induced Mr. Jennings to allow the discharge of Parke from that establishment?—He said that he thought he was of sound mind, and that it was owing to his advice that he was let out.

You did not understand that he was let out at the wish of his wife, but in consequence of the representation of Mr. Jennings?—He said that his wife had no objection to it, but that it was owing, in the first place, to his own representation that he was let out.

Sir James Williams, called in; and Examined.

Sir
James Williams.

YOU are a director of the poor in the parish of Saint Pancras?—I am.

Have you been often present when Mr. Dillon has made representations to that board with respect to the care and management of the pauper lunatics belonging to that parish at Mr. Warburton's establishment?—No, I have not; I have been a director but a short time, and I had so much county business as a magistrate, that I had not attended till the immediate business of the lunatics was on the carpet; and having

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having a summons, as I have on all occasions, informing me, that it was intended to examine the lunatics at the White House at Bethnal Green, I then felt it my duty to attend, and I did attend in consequence of that, and that is the only time I have attended, with the exception of last Friday, when Mr. Dillon's pamphlet became in some measure the subject of inquiry at the board; I attended then in order that I might aid the cause of justice and do that which I thought right upon the subject.

What is the impression upon your mind as to the treatment of your lunatics in Mr. Warburton's establishment?—Perhaps I may answer that question generally, by saying, that as one of the magistrates on the committee to consider the propriety of erecting a Pauper Lunatic Establishment for the county, as soon as I became one of that committee I felt it my duty to go to the White House at Bethnal Green, without consulting anybody, and I went really to inform myself, because I considered that what I saw was a great deal better than what I heard; I believe that I was half an hour before I was admitted into the interior; when I came out it struck me that there must be some strong and cogent reason for that. The first excuse that was made I believe was the truth, that Mr. Jennings was taking money. After I had sat a little while, I said, "I really cannot wait, I am a county magistrate, either refuse me or let me go in;" he said, "I will attend you very shortly;" then afterwards he took me into another room, and appeared to fumble about for keys; then I believe he called his wife, or if not she came without calling, but he inquired if his keys had been seen, and he was told that they had not; at length he took them from the very place where he had been fumbling for them; and when I put these things together with what I saw, it did not very much please me. I went, as he told me, over the establishment. I do not mean to assert that he told me I went into every room, but in going through a chamber, I said, "now have you any thing worse than this, for I am wearied, and if they are all the same, I do not want to have a further repetition?" he said, "they are all the same, we have nothing worse than this." It struck me then as it strikes me now, that, perhaps, when a house of that sort is established with a view to getting money, the great object is to get that money, and to do as little for it as they can, in order to make the trade answer; but it is a most lamentable thing to see the lack of classification that there is; one poor woman appealed to me, she said, "if I could but get an opportunity of hearing one sermon how rejoiced I should be;" she wanted to have some religious advantage; I found her indeed reading a prayer book, and while I was speaking to her, another woman came blasting her eyes, and saying that she wanted so and so. Now that is a sight so harrowing to the feelings that it must be painful to any man. With respect to any curative process, it struck me that there is none at all; I have attended a good deal at prisons, and it strikes me that they are worse off than prisoners a great deal, while they are labouring under the greatest affliction that can attach to human nature, and which none of us can be sure that we shall not experience. The second time I went, Mr. Serjeant Pell went with me, and then knowing that there were crib beds and apartments which I had not seen, I desired that I might see every thing, and we did see them then.

You did not see the crib-rooms the first time?—No, nothing like it; Mr. Jennings assured me that there was nothing worse than what he showed me.

You saw none of the crib-rooms the first time?—No.

Were those crib-rooms infinitely worse than anything you had seen the first time?—Yes; I dare say they may be improved, but I do not think on the whole that that house is so well managed as Burrows's at Hoxton; Mr. Serjeant Pell and myself both drew that conclusion; they were not so cleanly; they were more crowded; in fact, the numbers prevent that looking after them individually that might otherwise take place; there is a total lack of classification. The second time, when Mr. Serjeant Pell went with me to Burrows's, we found a little boy about thirteen or fourteen years of age, whose case I begged the Serjeant to take up, as he had more time than myself; he got the boy released in a few days; the boy had been there but three days; I believe he was as perfectly sane as the Serjeant and myself.

When you found this case of that boy, to whom did you apply with respect to it in the establishment?—To the master of the house, or the managing man whose name I forget; I liked the man very much; he said, "The boy is sent here from Barking, I know nothing else." I said, "Has he been examined by any medical man." He said, "No, I do not know that he has." He was a fine lad, a little fellow with the dress of a fisherman on him; he was apprenticed to a fisherman; and the account the boy gave, was, that he done something wrong, he had offended his master and

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he had thrown three or four pails of water upon him, and it made him so ill that he had had a fever, and I dare say he might have been disturbed in his mind in consequence; and he was sent to that house, and he was put with people that were as mad as could be. I saw one man struggling with five or six men, who were taking hold of him to prevent him from rushing out, when we came out; this was enough to make the boy mad. If there was nothing else but that want of classification, I should say that those houses are bad. I do not know that the people are necessarily cruel any more than that power naturally leads to that without good looking after. The third time I went, I went as one of the directors of Saint Pancras parish; we met Doctor Roots and Mr. Dillon the surgeon. I confess I went with a prejudice, I had seen a good deal of it on lunatic commissions; I went with a prejudice, that they were both favourable to keeping people there, but I believe I was wrong; but I made an observation soon after we had been in the room; I said, "I do not see the advantage of such an examination as this, if we are to have the officers of the house present, because I am sure the poor people are afraid of them, because I have no doubt that some punishment will await them, if they tell a tale that is not approved."

In the visits you paid to the establishment, were you allowed an unreserved intercourse with the patients without the presence of the keepers?—Whether the keepers would have let me or not I cannot say, because I did not ask it; it seemed to me, that going into the yard where there were perhaps one hundred people, I could not attempt to investigate, for if I did it with *A.* I might with *B.* and so on, it would be a task that would be almost without limit.

Can you state the dates of your visits?—I should think my first visit must have been in March, but I am not certain, it might be February, it might be January, but it was before we received any information of the crib bedsteads and that sort of treatment.

Was it before the poor of the parish of Mary-le-bone were removed?—Yes; the second time that I went was Thursday the 19th of April.

Was the boy that you saw at Mr. Burrows's, a pauper lunatic?—I believe that he was sent by the parish of Barking.

Did you understand whether there had been a medical certificate sent with him?—Yes there had been.

Do you know who signed that medical certificate?—I do not recollect the name; but Mr. Serjeant Pell will show the correspondence to the Committee, if they wish to see it.

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R E P O R T

FROM THE

SELECT COMMITTEE

ON

A N A T O M Y.

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p. 28.
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REPORT FROM SELECT COMMITTEE

R E P O R T.

THE SELECT COMMITTEE appointed to inquire into the manner of obtaining Subjects for Dissection in the Schools of ANATOMY, and into the State of the Law affecting the Persons employed in obtaining or dissecting Bodies; and to whom several PETITIONS for the removal of Impediments to the cultivation of the Science of ANATOMY were referred; and who were empowered to report the MINUTES OF EVIDENCE taken before them;—HAVE, pursuant to the Order of The House, examined the matters to them referred; and agreed to the following REPORT:

THE peculiar nature of the Subject which the Committee were appointed to investigate, has induced them to inquire principally into the practice of the Anatomical Schools of *London*, where, by personal communication with the most eminent surgeons and with the students and principal teachers of Anatomy, it could be fully ascertained that no detriment to their interests was to be apprehended from the publicity to arise out of the present inquiry. With regard to the practice of the provincial schools, to avoid the expense of summoning witnesses from a distance, they have been satisfied with written communications from resident professors or practitioners of eminence, which will be found in the Appendix.

The Committee have inquired into the nature of the difficulties which the Anatomists have here to contend with, whether arising out of the state of the law, or an adverse feeling on the part of the people; and into the evil consequences thence ensuing, as well to the sciences of Medicine and Surgery, as to all who study, teach, and practise them, and eventually to the members of the whole community. They have called witnesses to shew in what manner the wants of the Anatomist are provided for in several foreign schools, and to state their opinion, whether similar methods could be applied with advantage in this country, and if applied, would be adequate to remove the present difficulties.

The first origin of these difficulties is obviously to be traced to that natural feeling which leads men to treat with reverence the remains of the Dead; and the same feeling has prompted them, in almost all times and countries, to regard with repugnance, and to persecute, Anatomy.

As the importance of the Science to the well-being of mankind was discovered, the governments of different states became its protectors, and in this country particularly, by the statute of Henry the 8th, protection to a certain extent was given, and intended to be given to it; but that protection, which at first, perhaps, was fully adequate, owing to the rapid progress of the Science, has long since become wholly insufficient.

How limited were the wants of the Science in the former part of the last century, may be learnt from the lectures of Dr. *William Hunter*, who describes the professors of the most celebrated schools, both at home and abroad, as employing in

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Lectures of
Dr. W. Hunter.
London. 1784.
p. 88.
See also Appendix
to this Report, N° 3.
p. 125.

Idem. Memorial
to Earl Bute,
pp. 118, 119.

Idem. Memorial
to Earl Bute, p. 119.
Also, Dr. Matthew
Baillie's Posthu-
mous Works.
London, 1825.
pp. 71, 74.
Dr. W. Hunter's
Lectures, pp. 108,
109, 110, 119.

each course of lectures not more than one, or at most two, subjects, and as exhibiting the performance of the operations of surgery, not on human bodies, but on those of animals. He represents the students in Medicine and Surgery as never exercising themselves in the practice of dissection, because for such practice they had no opportunities.

For such a system of instruction the provisions of the statute of Henry the 8th might well be adequate, and these provisions, indeed, may now be considered of importance only as a distinct admission of the principle, that the government of this country ought to protect Anatomy. The reformation of this antiquated and imperfect system took place, in this country, in the year 1746, when Dr. *William Hunter*, having a singular enthusiasm for the science, established complete courses of Anatomical Lectures, and opened a regular school for Dissection. The reform thus introduced was complete, and its author exulted before his death in having raised and diffused such a spirit for dissection, that he should leave behind him many better Anatomists than himself.

Under his immediate pupils, and their successors, this School has gone on increasing. The earliest account that the Committee have met with of the number of anatomical students resorting to London, is that given by Mr. Abernethy, who states that shortly after the breaking out of the war with France, they amounted to 200. One of the witnesses, Dr. Macartney, computes their number in the year 1798 at 300: and Mr. Brookes, a teacher of Anatomy, in a calculation submitted to Sir Astley Cooper in the year 1823, then reckoned their number to be 1,000. It appears from the returns now furnished by the teachers of the different schools in London, that their number at present is somewhat above 800: the diminution in the number since the year 1823, being the consequence, probably, of the pupils resorting to foreign schools, the advantages of which were less known at the former period than they are at present.

When it is considered what a demand there is for practitioners, as well to meet the wants of an increased population at home, as of an extended empire of colonies and dependencies abroad, this rapid increase of students will not appear surprizing; and if it is considered also, that not only is that demand an increasing one, but that every practitioner, however humble, from that laudable desire for intellectual improvement which characterizes the present age, endeavours, if he can afford it, to obtain a good education, and must regard himself as ill-educated if he has not gone through a course of dissection, the eventual increase of dissecting students can hardly be calculated, should their wants be supplied abundantly and at a cheap rate.

Although the students now attending the schools of Anatomy in London exceed 800, not more than 500 of this number actually dissect. The duration of their studies in London is usually sixteen months, and during that time the number of subjects with which every student in Surgery ought to be supplied, appears from the evidence (although there is some difference on this point) to be not less than three; two being required for learning the structure of the parts of the body, and one the mode of operating. The total number of subjects actually dissected in the schools of London, in one year, is stated to be not greater than from 450 to 500, which is after the rate of less than one subject for each dissecting student; a proportion wholly insufficient for the purposes of complete education.

Dissection, on an extended scale, began in this country, before there existed any such general feeling in its favour, founded on an opinion of its utility, that the British government, after the example of some foreign governments, would venture openly to patronize it. Accordingly, when in 1763 Dr. Hunter proposed

See Dr. W. Hunter's
Memorial to Earl
Bute, and the Do-
cumentary Papers,
printed at the end
of his Lectures.

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to build an Anatomical Theatre, and to endow it with his museum and a salary for a professor, provided the government would grant him a site of ground for the institution, and his late Majesty would extend to it his countenance and protection, he met with a silent refusal. It was therefore only by stealth, and by means not recognized by the law, that the teacher was enabled to procure subjects. These means, it is notorious, from the time of Dr. Hunter down to the present time, have been principally disinterment; though, of late, other illegal modes and contrivances, such as stealing before burial, personation of relatives for the purpose of claiming bodies, &c. have occasionally been had recourse to. For some time after the first establishment of dissecting schools, while the number of teachers and students was small, and the demand for subjects very limited, the means which were resorted to for obtaining a supply, were adequate to the wants of the students, and bodies were obtained in abundance and cheaply. The exhumators, at that time, were few, and circumspect in their proceedings, detection was rare, the offence was little noticed by the public, and was scarcely regarded as penal; so that (according to one of the witnesses) long after the decision of the Judges, in 1788, that disinterment was a misdemeanor, prosecutions for this offence were not common, and offenders taken in the fact were usually liberated. If this state of things had continued, though the illegality of the practices had recourse to must be conceded, yet they could scarcely be said to occasion evils of such magnitude, as to require a legislative remedy. But the number of students and teachers having greatly increased, and, with them, the demand for subjects and the number of exhumators, detections became frequent, the practice of exhumation notorious, and public odium and vigilance were directed strongly against the offenders. It may be collected from the debates in Parliament which took place in the year 1796, during the progress of a Bill for subjecting to dissection the bodies of felons executed for burglary and robbery, that, even at that time, the public regarded disinterment with strong feelings of jealousy.

In proportion as the public became vigilant, the laws relating to sepulture were interpreted and executed with increasing rigour; and as the price of subjects rose with the difficulty of obtaining them, the premium for breaking the laws increased with the penalty. The exhumators increased in number, and being now treated as criminals, became of a more desperate and degraded character.

The parties of daring men who now took to raising bodies, did it happen (as was frequently the case), that, while in pursuit of the same spoil, they fell in one with another, actuated by vindictive feeling, and regardless of the caution and secrecy on which the successful continuance of their hazardous occupation must depend, had contests in the places of sepulture—left the graves open to public gaze, or gave information to magistrates, or the relatives of the disinterred, against their rivals. Frequently, with a view to raise the price of subjects, to extort money, or to destroy rivalry, they have proceeded to acts of outrageous violence, tending to excite the populace against the teachers of Anatomy. These, and similar acts of violence or imprudence, have been constantly bringing exhumation to light, and have exasperated the public against both the exhumator and the Anatomist: and this to such a degree, that of late, in many cases, individuals, out of solicitude to guard the dead, have taken upon themselves to dispense with the laws of their country, and have fired upon parties attempting disinterment. Other circumstances, but of minor importance, have been assigned by some of the witnesses as augmenting the difficulty of obtaining subjects in London, or increasing the demand for them; but as regards them, the Committee beg leave to refer to the Evidence itself. The general result has been, with some difference, according to differences of place and season, (sometimes owing to the caprice and mercenary motives of the agents employed, at other times owing to the real difficulty of obtaining a supply,) that, of late, subjects have been to be procured,

Hunter's Lectures,
pp. 113, 118.

Question, 29.

Questions, 949, 1119,
1120, 1255, 1256.Questions, 1420,
1465.Questions, 434,
1277, 1403.

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1351.Questions, 180,
1351.Hansard's Parlia-
mentary Debates,
vol. 32. p. 918.Questions, 765,
et seq.Questions, 1277,
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13th Count of the
Indictment.

See Report of this
Trial in the Morning
Herald Newspaper,
Feb. 11, 1828.

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Question, 1158.
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either not at all, or in very insufficient quantity, and at prices most oppressive to the teacher and student.

The price of a subject, about thirty years ago, was from one to two guineas; the teacher now pays from eight to ten guineas; and the price has risen even to sixteen guineas. The teachers deliver subjects to their dissecting pupils at a lower price than that at which they purchase them, having been compelled to resort to this expedient, lest dissection in London should be abandoned altogether. The loss which they thus sustain, is made good out of the fees which they receive for attendance on their lectures in the Anatomical Theatre. The cost of providing subjects is also enhanced to the teacher, by his being required occasionally to defend the exhumator against legal prosecution, and to maintain him against want, if sentenced to imprisonment, and his family, in case he has one, until the period of his punishment expires.

Nor is it only of a precarious, insufficient, and expensive mode of obtaining subjects that the cultivators of Anatomy complain—it is by the law, not as regards the exhumators, but as it affects themselves, that they are aggrieved.

The first reported case of a trial for disinterment is that of *Rex v. Lynn*, in the year 1788, when the court of King's Bench, on a motion for an arrest of judgment, decided it to be a misdemeanor to carry away a dead body from a churchyard, although for the purpose of dissection, as being an offence *contra bonos mores* and common decency. In this state the law on the subject of disinterment, as interpreted by the court of King's Bench, appears to have remained, until the present year; when Davies and another were tried and convicted at the assizes at Lancaster, and subsequently received the sentence of the court sitting at Westminster, for having taken into their possession, with intent to dissect, a dead body, at the time knowing the same to have been unlawfully disinterred. A respectable teacher of Anatomy, residing at Liverpool, had been tried and found guilty on a similar indictment at the quarter sessions at Kirkdale, in the month of February in the same year. With these exceptions, magistrates appear hitherto to have taken no cognizance of receiving into possession a dead body, unless there were strict evidence that the receiver was a party to the disinterment; and on this practical view of the state of the law, professional men also appear hitherto to have acted. At present, however, a most intelligent magistrate, one of the witnesses, considers, that very slight evidence would connect the receiver with the disinterment; and that the purchase from the exhumator would suffice to send the case to a jury, the knowledge of the fact of disinterment being to be collected from the circumstances, if strong enough to justify the inference. It is stated, that there is scarcely a student or teacher of Anatomy in England, who under the law, if truly thus interpreted, is not indictable for a misdemeanor.

According to the opinion of the last cited witness, to be a party to the non-interment, as well as to the disinterment of a dead body, would render a person indictable for a misdemeanor. Two cases are cited in support of this opinion. In the one, *Rex v. Young*, a non-reported case, but referred to by the Court in the case of *Rex v. Lynn*, the master of a workhouse, a surgeon, and another person, were indicted for, and convicted of, a conspiracy, to prevent the burial of a person who died in the workhouse. In the other, *Rex v. Cundick*, which occurred at the Surrey spring assizes, in the year 1822, the defendant was found guilty on an indictment for a misdemeanor, charging him with not having buried the body of an executed felon, entrusted to him by the gaoler of the county for that purpose; but with having sold the body, for lucre and gain, and for the purpose of being dissected: and on this trial, it was not considered necessary to prove that the body had been sold for lucre, or for the purpose of dissection. The witness infers, from the analogy

analogy of all these cases, that to treat a dead body as liable to any thing but funeral rites, is an offence *contra bonos mores*, and therefore a misdemeanor.

Questions, 1154, 1159.

This state of the law is injurious to students, teachers, and practitioners, in every department of medical and surgical science, and appears to the Committee to be highly prejudicial to the public interests also.

It is the duty of the student to obtain, before entering into practice, the most perfect knowledge, he is able, of his profession; and for that purpose to study thoroughly the structure and functions of the human body; in which study he can only succeed by frequent and repeated dissection. But his wants cannot adequately be supplied in this country, except at an expense, amounting nearly to a prohibition, which can be afforded only by the most wealthy, and precludes many students from dissecting altogether. From the precariousness or insufficiency of the supply, the dissections and lectures are often suspended for many weeks, during which the pupils are exposed to the danger of acquiring habits of dissipation and indolence; and, from the same causes, that important part of surgical education is usually omitted, which consists in teaching how to perform on the dead body those operations which the student may afterwards be required to practise on the living. But not only does the student find dissection expensive and difficult of attainment; but he cannot practise it, without either committing an infringement of the law himself, or taking advantage of one committed by others. In the former case, he must expose himself to imminent hazard, and in either, he may incur severe penalties, and be exposed to public obloquy. The law, through the medium of the authorities entrusted with conferring diplomas, and of the boards deputed by them to examine candidates for public service, requires satisfactory proof of proficiency in Anatomical Science, although there are no means of acquiring that proficiency without committing daily offences against the law. The illegality and the difficulties attending the acquisition of the science, dispose the examiners in some cases to relax the strictness of their examination, and induce them, in the case of the Apothecaries Company, to dispense with dissection altogether; the persons to whom certificates are granted by the examiners of this Company, being those who, from their numbers* and extensive practice, ought especially, for the safety of the public, to be well instructed. The annual number of certificates so granted exceeds 400.

Questions, 2, 14, 15, 104, 171, 878, 975.

Questions, 16, 90, 95, 97, 155, 179, 218, 755, 963.

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Questions, 750 to 754, 960, 1280.

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Charter of the College of Surgeons, 1800.

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The teacher of Anatomy, besides the evils which befall him in common with the student, has to suffer others, arising also out of the state of the law, which affect him with peculiar hardship. The obstacles which impede the study of Anatomy in this country, are such, and the facilities presented to the study in foreign countries are so great, that those English students who are desirous of obtaining a thorough knowledge of the science, desert the schools at home, and repair to those abroad. Their principal resort is to Paris, where 200 English students of Anatomy are now pursuing their course of instruction. Dissection probably, under these circumstances, would scarcely be followed at home, were it not for the regulations of the College of Surgeons, which require the candidates for the diploma of the college to have learned the practice of surgery in a recognized school within the United Kingdom; so that the student, during the period required for learning this practice, in order that he may the sooner become qualified for his profession, employs a part of his time in learning also to dissect. These disadvantages, affecting the teacher, are such, that except in the most frequented schools, attached to the greater hospitals, few have been able to continue teaching with profit, and some private teachers have been compelled to give up their schools. To the evils enumerated it may be added, that it is distressing to men of good education and character to be compelled to resort, for their means of

Questions, 24, 248, 249, 304, 307.

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Questions, 412 to 416, 544, 949, 951 to 955.

* Computed at 10,000 in England and Wales. Appendix, p. 145.

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Questions, 1158,
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Questions, 50, 51.

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419, 457, 811, 813
to 815.

teaching, to a constant infraction of the laws of their country, and to be made dependent, for their professional existence, on the mercenary caprices of the most abandoned class in the community.

But it is not only to the student, while learning the rudiments of the science, and to the teacher, while endeavouring to improve it, that dissection is necessary, and the operation of the law injurious. It is essential also to the practitioner, that during the whole course of his professional career he should dissect, in order to keep up his stock of knowledge, and to practise frequently on the dead subject, lest, by venturing to do so unskilfully on the living, he expose his patients to imminent peril. He is required also in many important cases, civil and criminal, to guide the judgment of judges and of jurors, and would be rebuked were he to confess, upon any such occasion, that, from having neglected the practice of dissection, he was unable to throw light upon a point at issue in that science which he professed. He is liable, in a civil action, to damages for errors in practice, due to professional ignorance; though at the same time he may be visited with penalties as a criminal, for endeavouring to take the only means of obtaining professional knowledge.

Under these circumstances, affecting equally the student, teacher and practitioner, the Committee were not surprised to find that this inquiry excited considerable interest in all parts of the country, and that numerous petitions from all classes of the profession, connected with the science of Anatomy, were laid upon the table of The House, uniformly praying for an amendment of the existing law on the subject.

But independently of the bearings of the question on the interests of medical practitioners, and on the health of the community, the system pursued is productive of great evil, by training up a race of men in habits eminently calculated to debase them, and to prepare them for the commission of violent and daring offences. The number of persons who, in London, regularly live by raising bodies, is stated by the two police officers, examined before the Committee, not to exceed ten; but the number of persons, occasionally employed in the same occupation, is stated by the same witnesses to be nearly 200. Nearly the whole of these individuals, as is admitted by the exhumators themselves who were examined before the Committee, are occupied also in thieving, and form the most desperate and abandoned class of the community. If, with a view to favour Anatomy, exhumation should be allowed to continue, it appears almost a necessary consequence that thieves also should be tolerated. It should seem useless, however, with a view to suppress exhumation, to endeavour to execute the existing laws with increased severity, or to enact new and more rigorous ones. The effect of interpreting and executing the laws with increasing rigour has been, not to suppress exhumation, but to raise the price of bodies, and to increase the number of exhumators. So long as there is no legalized mode of supplying the dissecting schools, so long the practice of disinterment will continue: but if other measures were devised, which would legalize and ensure a regular, plentiful and cheap supply, the practice of disinterring bodies, and of receiving them, would, of necessity, be entirely abandoned.

Before adverting to those new methods for obtaining an adequate supply of subjects, which have been suggested by the witnesses who have been examined before the Committee, they will state in what manner, according to the evidence adduced, the schools of Anatomy at Paris are provided. They have also inquired into the practice of some other foreign schools, for an account of which they beg to refer to the evidence itself; and they dwell upon the practice of the schools of Paris, because it approaches most nearly to the plan recommended by most of the witnesses for adoption in this country.

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The administration of all the hospitals at Paris, since the period of the Revolution, has been confided to a public board of management. The rule at the hospitals is, that every patient who dies shall be attended by a priest, and that, after the performance of the usual ceremonies of the Catholic church, the body shall be removed from the chapel, attached to the hospital, to the dead room, and there remain for twenty-four hours, if not sooner claimed by the relatives. Bodies may be examined after death, by the medical officers attached to a hospital, in order to ascertain the cause of death; but may not be dissected by them. A body, if claimed by the friends after examination, is sewed up in a clean cloth, before being delivered to them. If not claimed within twenty-four hours after death, after being enveloped in a cloth in a similar manner, it is sent, in the manner hereafter described, to one of the dissecting schools.

There are no private dissecting schools at Paris, but two public ones; that of the Ecole de la Medicine, and that adjoining the Hôpital de la Pitié. These are supplied exclusively from the different hospitals and from the institutions for maintaining paupers, the supply from certain of these establishments being appropriated to one school, and that from the remaining establishments to the other.

The distribution of subjects to the two schools is confided to a public officer, the Chef des travaux Anatomiques. He causes them to be conveyed from the hospitals, at an early hour, in a covered carriage, so constructed as not to attract notice, to a building at the schools, set apart for that purpose. They are then distributed by the prosecteurs to the students; and, after dissection, being again enveloped in cloth, are conveyed to the nearest place of interment.

The students at the Ecole de la Medicine consist of young men who have distinguished themselves at a public examination, though the person at the head of the establishment is also allowed to admit pupils to dissect. The school of la Pitié is open to students of all nations, who, on entering themselves, may be supplied with as many subjects as they require, at a price varying, according to the state in which the body is, from 3 to 12 francs; priority of choice, however, being given to the élèves internes of the different hospitals, and the subjects being delivered to them at a reduced price. English surgeons were here permitted, until lately, to engage private rooms for the purpose of lecturing on Anatomy to students of their own nation, and to superintend their labours in the dissecting room. From the protection and facilities which have thus been afforded to the study of Anatomy at Paris, it has become the resort of the medical students of all nations; the practice of exhumation is wholly unknown, and the feelings of the people appear not to be violated.

It is the opinion of almost all the witnesses, that the adoption in this country of a plan, similar in most respects to that which prevails in France, would afford a simple and adequate remedy for the existing evils. They recommend that the bodies of those who during life have been maintained at the public charge, and who die in workhouses, hospitals and other charitable institutions, should, if not claimed by next of kin within a certain time after death, be given up, under proper regulations, to the Anatomist; and some of the witnesses would extend the same rule to the unclaimed bodies of those who die in prisons, penitentiaries, and other places of confinement. In the hospitals which supply subjects to the Anatomical schools of France and Italy, religious rites are paid to the dead, before giving up the bodies for dissection: in the plan proposed for this country, most of the witnesses recommend that the performance of religious rites should be deferred until after dissection, and they are anxious that the Anatomist should be required, under adequate securities, or a system of effective superintendence, to cause to be administered, at his own expense, to the bodies which he dissects, religious solemnities and the usual rites of burial.

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Question, 513, 637.

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Question, 630.

Questions, 481, 511. Letter p. 55.

Questions, 473, 774, 495.

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Questions, 482, 511, 515, 605. Letter p. 55.

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Questions, 77, 132, 211, 296, 427, 465, 629, 846, 920, 1178, 1230, 1436, 1437, 1470.

The plan proposed has this essential circumstance to recommend it—that provided it were carried into effect, it would yield a supply of subjects that, in London at least, would be adequate to the wants of the Anatomist. The number of Anatomical students resorting annually to London, and the number of subjects with which they ought to be supplied, have been already stated. It appears from the returns obtained by the Committee from 127 of the parishes situate in London, Westminster and Southwark, or their immediate vicinity, that out of 3,744 persons who died in the workhouses of these parishes in the year 1827, 3,103 were buried at the parish expense; and that of these, about 1,108 were not attended to their graves by any relations. There are many parishes in and around London from which at the time of making this Report returns had not been delivered in; but it may be inferred from those returns which have been procured, that the supply to be obtained, from this source alone, would be many times greater than that now obtained by disinterment; that when added to the supply to be derived from those other sources which have been pointed out, it would be more than commensurate to the wants of the student, and consequently, that the plan, if adopted, as meeting the exigencies of the case, would eventually be the means of suppressing the practice of exhumation.

If it be an object deeply interesting to the feelings of the community that the remains of friends and relations should rest undisturbed,—that object can only be effected by giving up for dissection a certain portion of the whole, in order to preserve the remainder from disturbance. Exhumation is condemned as seizing its objects indiscriminately, as, in consequence, exciting apprehensions in the minds of the whole community, and as outraging in the highest degree, when discovered, the feelings of relations. If selection then be necessary, what bodies ought to be selected but the bodies of those, who have either no known relations whose feelings would be outraged, or such only as, by not claiming the body, would evince indifference on the subject of dissection. It may be argued, perhaps, that the principle of selection, according to the plan proposed, is not just, as it would not affect equally all classes of the public; since the bodies to be chosen would, necessarily, be those of the poor only. To this it may be replied; 1st,—that even were the force of this objection to a certain degree admitted, yet that, to judge fairly of the plan, its inconveniences must be compared with those of the existing system; which system, according to the evidence adduced, is liable in a great measure to the same objection; since the bodies exhumated are principally those of the poor; 2dly,—that the evils of this, or of any other plan to be proposed on this subject, must be judged of by the distress which it would occasion to the feelings of surviving relations; and the unfairness to one or another class of the community,—by the degree of distress inflicted on one class rather than another; but where there are no relations to suffer distress, there can be no inequality of suffering, and consequently no unfairness shown to one class more than another.

One or two of the witnesses, who appear to be either favorable, or not opposed to the principle of the plan, speak with doubt of its success, as though it would be found impracticable to reconcile the public to its introduction: and one, in particular, apprehends that religious feelings may impede its adoption. An objection founded on religious feelings, does not apply to the plan in question only, but would be equally valid, generally, against all dissection whatsoever; and should lead those who urge it, consistently with their own principles, to endeavour to put down altogether the study of practical Anatomy.

Though it may be true that the public are, to a certain degree, averse to dissection, yet it is satisfactory to find several of the witnesses adducing facts to prove that those feelings of aversion are on the decline. They state, that in those parish infirmaries where the bodies of those who die are examined, as the practice has become

See page 4.

Appendix, p. 142.

Question, 506.

Questions, 141, 175,
229, 347, 351, 457,
811.

Questions, 500,
1151, 1152, 1183,
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Questions, 63, 123,
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Questions, 817,
1419, 1430.

Questions, 63, 123,
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Questions, 1133,
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Questions, 1138,
1141.

Questions, 128, 130,
148, 149, 310, 311,
844, 891, 906, 983.

Questions, 917, 935,
936, 1461.

become

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become common, it has been viewed with less jealousy: that in those hospitals where a similar rule prevails, neither patients themselves are deterred from applying for admission, nor their relatives on their behalf: that the addition of public dissecting-rooms to hospitals, has not produced any diminution in the number of applications for relief within the walls of those hospitals; and that, by reasoning with the friends of those who die, and by explaining to them how important it is to the art of healing, that examination should take place after death, they may usually be brought to consent to the bodies of their friends being examined. Hence it is argued, that in involving the subject of dissection in mystery, as has hitherto been the case, the public have been treated injudiciously; that with proper precautions, and the light of public discussion to guide them, they may be made to perceive the importance of the study generally, and the reasonableness of the particular measure now contemplated, and that when they come to regard it as the means of suppressing exhumation, they will receive it with favour, and finally acquiesce in it.

The legislative measure which most of the witnesses are desirous of, in order to enable them to carry the plan into effect, is the repeal of any existing law, which would subject to penalties those, who might be concerned in carrying the proposed plan into execution: they wish for an enactment, permissive and not mandatory, declaring that it shall not be deemed illegal for the governors of workhouses, &c. and for Anatomists, the former to dispose of, the latter to receive and to dissect, the bodies of those dying in such workhouses, &c. such bodies not having been claimed, within a time to be specified, by any immediate relations, and due provision being made for the invariable performance of funeral rites. Some few of the witnesses, indeed, who state that they wish for the success of the plan, contemplate any legislative interference whatever in this matter with apprehension; but they do not appear to have been aware how nearly the cases decided by the courts of law, and already adverted to, would apply to persons engaged in executing the plan in question. In those cases, the bodies for the non-burying of which the defendants were severally convicted, were those of a pauper who died in a workhouse, and of a person who had suffered death as a felon. If these cases apply, as it appears they do, to persons engaged in giving up or in receiving, for other purposes than for burial, the bodies of the inmates of workhouses or of prisons, such impediments to the success of the plan, cannot be removed, as these witnesses think they might be, simply by the favorable interference of the executive Government, however disposed to show indulgence to the profession; but an Act of the legislature can alone provide a remedy.

Amongst the measures that have been suggested for lessening the dislike of the public to dissection, is that of repealing the clause of the Act of Geo. II. which directs that the bodies of murderers shall be given up to be anatomized. It appears from the returns already laid before the House, that, as regards the direct operation of this clause, on the supply of subjects, the number which it yields to the Anatomist is so small in comparison of his total wants, that the inconvenience which he would sustain from its repeal would be wholly unimportant. As to its remote operation, almost the whole of the witnesses examined before the Committee, and of those whose written communications will be found in the Appendix, are of opinion, that the clause in question, by attaching to dissection the mark of ignominy, increases the dislike of the public to Anatomy, and they therefore are desirous that the clause should be repealed.

The Committee would be very unwilling to interfere with any penal enactment which might have, or seem to have, a tendency to prevent the commission of atrocious crimes; but as it may be reasonably doubted whether the dread of dissection can be reckoned amongst the obstacles to the perpetration of such crimes, and as it is manifest that the clause in question must create a strong and

Questions, 128, 147, 387, 983, 1134, 1135, 1136.

Questions, 197, 198, 274, 275, 1048 to 1054.

Questions, 906, 907, 983, 1055.

Questions, 149, 469, 965, 966, 984.

Questions, 216, 239, 500, 624, 629, 938, 1174, 1178, 1179, 1230, 1434 to 1456, 1459, 1462.

Questions, 81, 131, 208, 303, 348, 456, 549, 624, 847, 937.

Questions, 878, 885.

Rex v Young, and
Rex v. Cundick.

Questions, 883, 1210, 1211, 1212.
Questions, 44, 45, 46, 115.
Questions 880, 886, 887.

Sessional Paper of
1828, N^o 143, pp. 9, 17.

Questions, 58, 120, 196, 227, 238, 290, 346, 364, 387, 420, 431, 547, 846, 872, 888, 925, 942, 961, 981, 1182, 1309, 1373, & Appendix, N^{os} 1, 3, 4, 6, 7, 10.

Questions, 1127, 1180, 1181, 1271.

mischievous prejudice against the practice of Anatomy, the Committee think themselves justified in concluding, that more evil than good results from its continuance.

The Committee consider that they would imperfectly discharge their duties, if they did not state their conviction of the importance to the public interests of the subject of their inquiries. As the members of the profession are well educated, so is their ability increased to remove or alleviate human suffering. As the science of Anatomy has improved, many operations formerly thought necessary have been altogether dispensed with; most of those retained have been rendered more simple, and many new ones have been performed, to the saving of the lives of patients, which were formerly thought impossible. To neglect the practice of dissection, would lead to the greatest aggravation of human misery; since Anatomy, if not learned by that practice, must be learned by mangling the living. Though all classes are deeply interested in affording protection to the study of Anatomy, yet the poor and middle classes are the most so; they will be the most benefited by promoting it, and the principal sufferers by discouraging it. The rich, when they require professional assistance, can afford to employ those who have acquired the reputation of practising successfully. It is on the poor that the inexperienced commence their practice, and it is to the poor that the practice of the lower order of practitioners is confined. It is, therefore, for the interest of the poor especially, that professional education should be rendered cheap and of easy attainment; that the lowest order of practitioners (which is the most numerous), and the students on their first entry into practice, may be found well instructed in the duties of their profession.

Such, on an attentive consideration of the Evidence adduced, is the deliberate judgment of the Committee on the matters submitted to them; and it now remains for The House to consider whether it will not be expedient to introduce, in the course of the ensuing Session, some legislative measure, which may give effect to the recommendations contained in the present Report.

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Cæsar Hawkins, Esq.	- - -	39
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Richard Dugard Grainger, Esq.	- - -	45
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MINUTES OF EVIDENCE.

Luncæ, 28^o die Aprilis, 1828.

HENRY WARBURTON, ESQUIRE,
IN THE CHAIR.

Sir Astley Cooper, Bart. called in ; and Examined.

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Dr. Baillie's
Posthumous Works,
p. 87.

Idem, p. 88.

Idem, pp. 87, 88.

1. **YOU** are President of the Royal College of Surgeons, and have been for many years teacher of anatomy and surgery at Guy's and St. Thomas's Hospitals, and surgeon to Guy's Hospital?—Yes.

2. What is your opinion as to the necessity of dissection, both for teaching what is actually known in anatomy, and for the further improvement of that science?—I should reply, that without dissection there can be no anatomy, and that anatomy is our polar star, for, without anatomy a surgeon can do nothing, certainly nothing well.

3. Do you think the opinion of Dr. Baillie correct, who states in his posthumous lecture on medicine and surgery,—“ If then anatomy be of so much use in physic and in surgery, it ought to be earnestly cultivated by those who really wish to understand their profession and to become respectable in it; this is not a trifling matter, justice and humanity require every exertion where the lives of our fellow-creatures are concerned; there are many professions where negligence or inattention may be reckoned a fault, but in ours it is a crime?”—I certainly concur in that sentiment.

4. Doctor Baillie also states in a further passage, “ Anatomy cannot be learnt without the employment of the knife upon the dead body, that great basis on which we are to build the knowledge that is to guide us in distributing life and health to our fellow creatures; need I say more to influence men of conscience and humanity to be zealous and industrious.” He further states, “ the parts of the animal body are so numerous and complicated, that in order to be retained in the memory, they require a strong impression; this cannot be made by the eye alone, the eye is quick and so impatient as to run over a number of objects in a short time; it is therefore necessary, that the hand should be employed to confine the wandering of the eye, and to attach it for a sufficient length of time to one object; it is for this reason that lectures by themselves never did make or ever can make a good anatomist.” Do you concur in that?—In those sentiments I entirely concur, and every medical man must accord.

5. Are not many operations now performed in consequence of the increased knowledge of dissection, that were formerly thought too difficult?—With respect to operations, I wish to state, that if Mr. Hunter, who was the father of modern surgery, were at this moment to rise from the grave, he would not believe in the improvements which have taken place since his death, which occurred 34 years ago; and if you ask for an illustration of this, I will mention an instance: a man, when I was first at St. Thomas's Hospital, which was in the year 1784, used to exhibit himself and receive money from the students for the exhibition, because he was one of those remarkable persons who had recovered from an operation for what surgeons call popliteal aneurism, which disease arises from the giving way of an artery in the ham, and for which it is required that the artery of the thigh should be tied; this man had the artery tied, and recovered. At the present moment there is not an individual who is educated in London, who would not be ashamed of himself if he could not perform that operation, or tie any of the accessible arteries in the body. Surgery is also improved in the diminution of operations, for at the time at which I first entered the profession, I should say there were at least three operations for one at the present moment; at that time, a man who had an injury to

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to his head, was very generally trephined; but now that operation is rarely performed. At that time limbs were amputated for compound dislocations, but now very rarely.

6. To what do you ascribe that diminution of operations, to an increased knowledge of the anatomy of the parts?—To the inspection of the dead leading to the knowledge of the changes which parts have undergone from accident or disease, and in this way the surgeon has been taught the impropriety of his ancestor's practice.

7. What is the demonstrator expected to teach the pupils who enter the schools for dissection; is it not the economy, structure and functions of the different parts of the body, and how to perform on the dead body the best known surgical operations?—With respect to that question, the term demonstrator does not exactly apply, there is a difference between a demonstrator and a lecturer; the proper duty of the demonstrator is to attend the pupil for the purpose of giving him information in the dissecting room, but the lecturer communicates his information in the theatre; all that ought to be expected of a demonstrator is, that he should tell the pupils the names and uses of the parts which are exposed in his dissections.

8. In any part of the course which a student is now expected to go through, is he instructed how to perform upon a dead body, the principal of those operations which in the common course of practice, he may be required to perform upon the living?—He is not only shown the mode of performing different operations, but whenever subjects can be obtained for the purpose, it is considered that it is his duty to perform the operations himself upon the dead body.

9. Can bodies be obtained in such numbers at present, that it frequently happens that the students have an opportunity of performing those operations upon a dead body?—It now very rarely happens that a student can obtain a body for the purpose of performing operations, and there is a lecturer in London who will be probably examined by this Committee, who has been unable to obtain a body to exhibit operations upon the dead, for a great number of days.

10. Can you state at all, how many bodies have been used in teaching the pupil how to perform operations upon the dead body, that is, in the hospital-schools in London, in the course of the year?—I am afraid there have been scarcely any lately used by the students, but at all events very few, on account of the great difficulty in obtaining them.

11. You nevertheless would consider that an essential part of a good course of surgical instruction?—My opinion is, not only that no person should practise surgery without privately performing all the operations upon the dead, but that he should also exhibit his powers of operating upon the dead, in the presence of a great number of individuals.

12. Can the young practitioner be expected to possess the necessary courage in performing a difficult operation on the living, if he has not already been taught to perform a similar operation upon a dead body?—He must be a blockhead if he made the attempt, and the practice of the most sensible and the most expert surgeons in London has been to visit the receptacles for the dead, for the purpose of performing the operation which they were about to execute upon the living, if the operations were in the least novel.

13. Is it in the dissecting room or in the theatre, that the pupils are principally taught the morbid structure of bodies in different stages of disease?—The morbid changes are principally shown in the theatre, but they are also investigated in the dissecting room.

14. Can a student know when to cut with freedom, when with caution, and when not at all, if he has not an intimate knowledge of the structure of every part of the human body?—I would not remain in a room with a man who attempted to perform an operation in surgery, who was unacquainted with anatomy, unless he would be directed by others; he must mangle the living, if he has not operated on the dead.

51. Can a competent knowledge of Anatomy be obtained by substituting for the dead body, casts or models?—It is impossible, because a knowledge of Anatomy consists not only in being acquainted with the names of things, but with their relative situation, and relative situation cannot be taught by casts or by models, in papier machée.

16. Can you state whether the examiners of the candidates for diplomas at the Surgeons College, have observed any important difference in the qualifications of

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the different candidates, according as they come from schools where facilities are given to dissection, or from those where great difficulties are interposed?—In answer to that question I have to inform the Committee, that it frequently happens at the Royal College of Surgeons, that we have to deplore that men are obliged to be rejected on account of their imperfect information, and it is the more to be regretted that it is often not the fault of the individual, for he has taken all the pains that could be required of him, but it unfortunately arises from the parents having mistakenly entered their children with persons who, either on account of the expense of Anatomy, or from the difficulties in obtaining bodies, are really unable to instruct those who become their pupils; and at the last meeting but one at the Royal College of Surgeons, we were under the necessity of rejecting a man, into whose character we afterwards enquired, and we found he had been a very industrious student; but when he was asked the situation of an important part of the body he had never seen that part, and he did not seem to know of its existence, he was not at any rate informed of its situation, and he was obliged to be rejected upon this ground. It was found that he had never seen the part, either in the dead body or in a preparation. The result is extremely painful to our feelings, for we are punishing the sins of the father upon the child, we are doing that which the young person does not deserve, because he has industriously studied his profession as far as his opportunities permitted, and yet we are obliged to reject him because opportunities have not been furnished to him of learning his profession, and he would become a curse to the public.

17. Without requiring you to specify what the schools are, the Committee ask you whether you have reason to suppose that there are schools in London, either attached to hospitals or private establishments, where an endeavour has been made to substitute models and casts for the actual body in teaching Anatomy?—I cannot answer that question from my own experience; I have heard so; I know there is an immense difference in the number of bodies dissected in different schools; that in some schools there are scarcely any bodies dissected; that in others, where there is an equal number of pupils, there will be twenty or thirty bodies dissected during the season.

18. If Anatomy is learned from the study of the human frame, and is not learned by dissecting the dead body, must it not be learned by operating on the living?—Decidedly; and that question I wish to speak to in the following manner. The cause which you gentlemen are now supporting, is not our cause, but your's; you must employ medical men, whether they be ignorant or informed; but if you have none but ignorant medical men, it is you who suffer from it; and the fact is, that the want of subjects will very soon lead to your becoming the unhappy victims of operations founded and performed in ignorance.

19. If the attainment of Anatomy is rendered difficult and expensive, who will be the principal sufferers, the rich or the poor?—That is a question very difficult to answer, upon this ground, that perhaps, if there are not opportunities of obtaining a sufficient supply of bodies in England, persons may go to the continent and acquire information there at a considerable expense, and when they return they may be the persons selected by the rich to attend them; the evil will then certainly fall upon the poor. I conceive that ignorance in the profession must be very much felt by the poor, because the rich will have those who have the reputation of being the best informed; but if education is to be confined to our own country, in the present difficulties in Anatomy, the rich and poor must both become the victims of the ignorant and unskilful surgeon.

20. What is the number of schools in Anatomy, as taught in London?—Ten or eleven.

21. Will you specify them?—Guy's Hospital, St. Thomas's Hospital, Mr. Grainger, the London Hospital, St. Bartholomew's Hospital, the school of Mr. Tyrrell in Aldersgate-street, the school in Windmill-street, the schools of Mr. Carpue, Mr. Bennett, Mr. Dermott, and Mr. Sleigh.

22. Your answer includes those attached to hospitals, and the private establishments of individuals?—Yes; I believe I have mentioned all, excepting Mr. Tuson.

23. Can you state what is the number of pupils in Anatomy attending all those different schools in London?—I believe about 700.

24. Would not the number be considerably greater than 700, if the difficulties now attending the study of anatomy were removed?—Decidedly so; for all those obliged to go abroad to gain instruction, would remain in England.

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25. General practitioners, for instance, who do not take out their diploma from the College of Surgeons, would more frequently go through a course of dissection if the expense were considerably lessened?—Yes, probably they would occasionally dissect; but if a man does not study Anatomy when he is young, he very rarely, after he is settled, acquires any substantial anatomical knowledge.

26. Can you state what is the number of bodies that on an average each pupil ought to dissect, in the course of a season of sixteen months, to study Anatomy in a competent manner?—If he be afterwards to practise surgery, I should say three bodies are required, two for anatomical purposes, the other for operations on the dead; less would be insufficient; for a half-anatomist is a most dangerous surgeon.

27. Can you state what is the number of bodies actually dissected now at the different schools in the course of a season?—I have taken pains on the subject, and I think 450, or thereabouts.

28. The number therefore actually dissected is very considerably less than the number which you would consider sufficient for a complete course of anatomical instruction for that number of pupils?—Yes, very considerably less.

29. In what manner is it generally understood that the bodies obtained for the dissecting schools are obtained?—By exhumation principally.

30. What is the present price of a subject?—Eight guineas.

31. At what do you remember it to have been formerly?—When I entered the profession it was two guineas; since that period it has been fourteen.

32. At one period had not one person the complete control and monopoly of the whole supply for the profession?—Yes.

33. Can you state any thing particular relating to the conduct of that person in raising the price?—The fact was, that the anatomists of London were completely at the feet of the resurrection men; an individual possessing considerable talents, who the moment he was opposed by others, burst into the places in which bodies were contained, and spoiled them for dissection, and did not hesitate to commit burglarious acts for that purpose; or if there was a party of persons disposed to oppose him, he excited a riot against those individuals, and pointed them out as bad characters and as resurrection men; and the magistrates in the Borough were under the necessity very often of settling those differences; the result of which was the present expense of dissection, because it was impossible to compete with a clever fellow, who was also a man of property; and this man therefore had the power of raising the price of subjects as he pleased, and of obliging one lecturer and opposing another.

34. Since the time when this person flourished, has not the difficulty arising out of one gang opposing another occasioned an increase of price?—The possibility of obtaining a supply of bodies from London burial grounds is almost destroyed.

35. Have you heard of any understanding existing between the persons who carry on these practices and the sextons or other parish officers?—The sextons and gravediggers are always in pay, as far as I have heard; indeed, I have no idea of their being able to procure a body, except occasionally, without it; it is true that a man may go to a church-yard and take a body, and leave the grave disturbed till the gravedigger views it in the morning; but he cannot take a body without the gravedigger being informed of it, or suspecting it.

36. If any of the persons who are engaged in those practices, are detected, is not a demand made upon the surgeon for paying the law expenses, and supporting them in case of their being imprisoned?—Some allowance is made to them in prison; but at the present moment two surgeons are bailing a man at the expense of 100 l. who has been detected in exhumation.

37. You have already stated that bodies are not to be had in the quantity necessary for instruction, by the process of exhumation?—Certainly they are not.

38. Are not the lecturers frequently now obliged to wait for bodies before they can proceed with their course?—At the present moment I learn that it is so; it has very very frequently happened so to myself, to be obliged to alter the order of my course on this account.

39. Has not the difficulty been for a series of years on the increase?—For a series of years it has been on the increase.

40. What observations have you been led to make on the characters of the exhumators,

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mators, and what do you understand to be their ordinary occupations?—The lowest dregs of degradation; I do not know that I can describe them better; there is no crime they would not commit, and as to myself, if they would imagine that I should make a good subject, they really would not have the smallest scruple, if they could do the thing undiscovered, to make a subject of me.

41. Do you understand, that with regard to those persons, exhumation is not their sole mode of livelihood?—With many it certainly is not.

42. Do not those persons exercise great power in preventing occasionally the lecturers at the regular schools from obtaining any supply whatever, according as they may happen to be in favour or disfavour?—Yes; if they refuse to give them the fees they demand, they refuse a supply, and, as I before stated, the teacher is at their mercy.

43. And obliged frequently in consequence to suspend his course?—He has been sometimes obliged entirely to suspend his course, but that has never happened to myself, but I have changed its order.

44. Has the Secretary for the Home Department, both in the present and late government, shown every indulgence in his power to the gentlemen of the profession engaged in teaching anatomy?—Nothing can have exceeded the discretion, the kindness and anxiety of Mr. Peel on the subject, and I ought also to say, that the Marquis of Lansdowne has behaved in the kindest manner, and done all that he discreetly could, to relieve us from the difficulties under which we labour, and which impede the progress of science, and will soon render the profession a curse, instead of a blessing.

45. What means do you apprehend are within the command of the Secretary for the Home Department, in mitigating, as far as in him lies, the difficulties under which you labour?—Under his immediate control, I believe only the hulks and convict ships.

46. Are the Committee to understand, by your expressions, “discretion, kindness and anxiety,” that the Secretary is disposed to execute the law towards the teachers of Anatomy, in case of detection, in the most lenient manner possible?—Mr. Peel has shown the strongest disposition to advance the science and the best interests of the profession, when he could effect it without hurting the feelings of the living.

47. If the persons engaged in exhumation are to be tolerated with a view to favour the supply of the dissecting schools, does not such toleration imply the winking at a class of men of the most depraved character?—Undoubtedly; yet there are exceptions.

48. Does not the practice of exhumation, as being revolting to the feelings of the public, tend to increase their dislike to dissection generally?—It is one great cause of that dislike.

49. Is it not distressing to men of character and education, as the teachers in the schools of Anatomy are, to be obliged to have recourse to a violation of the law, in order to obtain a supply of bodies and perform their duty towards their pupils?—The great difficulty teachers have to contend with, is the management of those persons, and it is distressing to our feelings that we are obliged to employ very very faulty agents to obtain a desirable end.

50. Does the state of the law actually prevent the teachers of Anatomy from obtaining the body of any person which, in consequence of some peculiarity of structure, they may be particularly desirous of procuring?—The law does not prevent our obtaining the body of an individual if we think proper; for there is no person, let his situation in life be what it may, whom, if I were disposed to dissect, I could not obtain.

51. If you are willing to pay a price sufficiently high, you can always obtain the body of any individual?—The law only enhances the price, and does not prevent the exhumation; nobody is secured by the law, it only adds to the price of the subject.

52. What have professional men generally understood to be the law on the subject of receiving into their possession, for the purpose of dissection, the bodies of persons who have been disinterred; have they known that for so doing they were liable to an indictment for a misdemeanor?—Until I read the charge of Baron Hullock, I did not understand that a surgeon was exposed to any danger from dissection, therefore

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therefore I have never concealed dissection in my own house. I had a room in my own house in the City, in which it was very well known that dissections were conducted; I did not then know that I was amenable to the law, but now I should be afraid to have a body in my possession.

53. Have the gentlemen of the profession been aware that the only bodies legally liable to dissection in this country, were the bodies of those persons who have been executed for murder?—We did not consider, until of late, that it was a misdemeanor to have a body in our possession.

54. Is it not the practice of the magistrates to issue search warrants in case of any complaint being made, that a body, which has been disinterred, is at a dissecting room?—They have the power of doing so.

55. Are candidates required by the College of Surgeons, before they receive their diplomas, to have attended anatomical lectures and themselves to have practised operations on dead bodies?—They must bring certificates of their having attended three courses of anatomical lectures and dissections.

56. Should you be disinclined to give that diploma unless you were well informed that the candidate had performed anatomical operations?—Undoubtedly, unless he brought certificates of his having attended three courses of anatomical lectures and dissections, he would not be permitted to practice; and he ought to have operated upon the dead.

57. Have you any idea of the number of Englishmen studying surgery in the foreign schools?—It is very difficult to ascertain precisely, but there are about 150 in Paris.

58. What is your opinion of the policy of giving up the bodies of murderers for dissection, as it affects the feelings of the public on the subject of dissection?—The law enforcing the dissection of murderers, is the greatest stigma on Anatomy which it receives, and is extremely injurious to science.

59. Do you know whether it is considered as compulsory on the surgeons, after they have received the body from the sheriff, to dissect it, or whether it is optional?—It is optional only.

60. The objections you have made to the dissection of murderers, would also apply to the dissection of suicides, in case, by any alteration of the law, their bodies also were to be given up for dissection?—I conceive the great principle on this question is this, that dissection should never outrage the feelings of the living; if therefore a surgeon could gain possession of the bodies of suicides, it would certainly distress the feelings of their relatives, and on that ground there is a great objection to it; in the second place, I would say, they would make very bad subjects, because all persons who die suddenly, become soon putrid; and in the third, if it had any moral tendency in preventing suicides, it would soon destroy any supply from that source.

61. What is the number of unclaimed persons dying in the hospitals in London?—I believe, that at least between 20 and 30 persons die in the winter and spring, in every hospital in London, containing 400 beds, who are unclaimed by their relations.

62. Do you believe that such unclaimed bodies might be rendered available for anatomical purposes?—That will depend upon the circumstance of the treasurer or governors being men of sense or not. As no person's feelings would be outraged, there would be no reasonable objection to it.

63. Is the number of unclaimed you have mentioned the usual average?—It is my belief that it is below the average; and most certainly, that in the proportion at least which I have stated, bodies are unclaimed.

64. What do you understand to be the practice in the army and navy hospitals?—They inspect bodies, but I believe they do not dissect them, from what I have learned.

65. The hospital at Chatham for instance?—There they dissect, and make preparations; for I have seen a collection there, made from such bodies.

66. Are any bodies obtained by purchase from the living before death?—Yes; but very rarely.

67. Is it the practice to bury the remains?—Yes, the remains are buried.

68. You are aware that you cannot enforce any such bargain; as the body of a dead person is considered by the law the property of no one?—We are so well informed on that point, that a surgeon would very rarely make such a bargain, and if a person were to offer his body to me, I should turn a deaf ear to him.

69. What can you state as to the supply that may be obtained by importing dead
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bodies either from Ireland or from the Continent?—Unless there was some better mode than that which is at present adopted, importation would furnish a very small and insufficient supply; but I conceive, that perhaps a director of Anatomy might be appointed by the Secretary of State, who should be enabled to receive bodies at the custom house; otherwise importation would give such an opportunity for smuggling, that I think there would be very considerable objection to that mode of supply.

70. What are the principal difficulties now interposed in the way of obtaining bodies by importation?—The time required to bring them, so that the body will be in an unfit state; and the doubt of its passing the Custom-house either abroad or at home.

71. Do you happen to be aware, that the greater number of the bodies which have actually been imported, have arrived in such a state that very few of them were fit for the dissecting room?—I understand that to be the case, but there are means of preparing bodies so as to enable them to last for a very considerable time.

72. So that if a system for importing bodies could be organized, to a certain degree under the protection of government, you think that difficulty might in some measure be surmounted?—It would be a very desirable mode of supply, and I think difficulties might be overcome.

73. Do you know what supply might be obtained of the bodies of persons who have died on board the hulks?—We have received bodies from the hulks, but the numbers were so small, and those received were so much mutilated, that they were of comparatively little use.

74. Have you been at all led to consider whether it would be expedient to obtain a supply from the bodies of those persons who die in workhouses, that are unclaimed by relatives or friends?—Upon this point I am extremely anxious to read to the Committee the information I have taken some pains to obtain respecting the Mary-le-bone infirmary and workhouse, and which I think may be here useful. I conceived that the Mary-le-bone workhouse was that which was most to my purpose, because it is unlike the Saint Giles's workhouse, in which there are a great number of Irish. At the Mary-le-bone workhouse I have learned the following particulars:—The infirmary of that workhouse contains 340 patients, the inmates in the workhouse and infirmary consisting of the aged, of children, and of those incapable of labour, are now 1,346; they were, in January 1828, 1,382; and in January 1827, 1,370; in the summer in July 1827, 1,095; and in July 1826, they were 967; so that they range between 960 and 1,400; they can accommodate 1,700 persons. The claimants in the parish are 6,383; of the out-poor there are four sources of burials. In the first place, they bury those dying in the infirmary; in the second, they bury those dying in the workhouse, who are attended by its apothecary; in the third, they bury those who die in the parish, attended by general practitioners; and in the fourth, they bury insane persons from a house which they have at Hoxton. The deaths in the workhouse are 110 annually; the deaths in the infirmary are 238; the still-born are 64; the parish poor not in the house, 161; and lunatics, 12; making a total of 585 persons buried in that workhouse in the year: one-fifth of those buried are unclaimed, 84 only are buried by their friends; of those who claim and attend the funerals, very few would claim if they were to be at the expense of the funeral; they are acquaintance rather than relatives; it is the Irish who chiefly bury their dead, and they will rarely permit inspection; 100 English subjects are inspected to one Irishman. I inquired whether that circumstance arose from their not having had their wake, and that perhaps after the wake they would be disposed to give up their friend; but the difficulty is the same after as before, so that it arises from some other feeling. The parish bury the bodies at Saint John's Wood Farm, and until very lately a woman only followed the corpse in order to give a sort of decency to the funeral, receiving two-pence or three-pence for her attendance; now they send five or six to the grave in a hearse at a time.

75. Will you explain the term inspection?—When a person dies of any curious disease, a medical man of proper professional zeal is anxious to know the exact nature of the disease of which his patient has died, and he applies to the friends to open the body, and the permission is given by the English, but not by the Irish.

76. It appears that 585 were buried by the parish in the course of one year, and that one-fifth are unclaimed; at least a hundred unclaimed bodies might be obtained, if it were deemed expedient, from this source?—Yes, from that workhouse alone; in the parochial infirmary of St. Giles in the Fields and St. George Bloomsbury, during the twelvemonth, between November 1826 and 1827, 505 bodies of paupers were

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were buried at the parish expense, including all ages, about 380 of which number died in the workhouse; and it is calculated that about one-fifth of the whole number had no friends to notice them.

77. Supposing it to be deemed expedient that the bodies of those unclaimed by their relatives at the workhouses should be given up for dissection, you would admit that under all circumstances the surgeons should engage to give to the bodies dissected a decent burial, and be at the expense of such burial?—It would be very proper; and it is my strong desire that the funeral rites should be performed over each body so obtained; and in France it is observed, for there is a sacrament always performed on the dead before the body is removed.

78. Are there not some instances in which the whole body being retained, there would be no remains to be buried?—The greater part of the subject is in some instances retained; but in the dissection of a body, even to make a preparation, there are parts which are not retained, and those parts are buried, but at present not with funeral rites; but it would be best that funeral rites should be performed previously to any anatomical examination.

79. If the practice of giving up the unclaimed bodies from workhouses were rendered legal, under what regulations would you propose to place the distribution of the bodies?—There I should revert to my idea of having a Director of Anatomy, so that there should be the most perfect impartiality in the distribution of the bodies, that every thing should be conducted decently, that the fees should be paid, and the funeral rites known to be performed; and when such a director was appointed I think there would be no difficulty: however, it would be very proper that, if bodies were received from workhouses, the surgeons of workhouses should be permitted previously to inspect them, or great difficulties would be made by them; and it is a duty to permit them to learn what was the cause of death in their patients.

80. Have you understood that great objections are at present made at parish workhouses and infirmaries to an inspection, even by parish surgeons, of the bodies of those who die under particular and remarkable diseases?—I must say that the overseers and churchwardens are, when dressed in their brief authority, excessively dictatorial and self-important.

81. In case of any alteration in the law, would you not deem it prudent in the first instance to permit only, and not to compel parish officers to give up for dissection the unclaimed bodies?—It would be much better I should think to reconcile them than to endeavour to compel them to it; the English lead better than they drive.

82. Would there not be a danger that they might not be reconciled to it, and that that would render the means of supply precarious?—Yes, there would be difficulties with the overseers and churchwardens, excepting they were men of understanding, and then there would be no difficulty.

83. Would it not be more conducive to the interests of science, and consequently of humanity, that students should have the dissection of the bodies of those persons whom they have attended during illness, than of those whom they have never seen previously?—Certainly.

84. Are you aware of the price of a body in France?—The price of a body in France has been upon the average seven francs.

85. You have stated that there is great difficulty in procuring the bodies of Irishmen; are you aware of the price of the bodies of Irishmen in Ireland?—Yes, an Irishman in Ireland does not appear to be so valuable as in England; in Ireland I have been informed, that a surgeon of one of the hospitals there, obtained during the winter a great number of bodies for dissection at a very very small price, less even than that in France.

86. Can you account in any way for that difference between the feeling of the Irish in England and in Ireland, which renders it so difficult to procure a body here, and so easy to procure it there?—The fact is, in Ireland, as I have been informed, the burials are conducted on the outside of the city, that the grounds are in detached situations, and that there is a ready access to exhumation; whereas in England that is not the case.

87. You do not conceive that it proceeds from the consent of friends?—Not at all.

88. Do you not know that there are a good many brought over from Ireland to this country?—I have heard so.

89. Were you rightly understood to have said, that there were certain schools in London where pupils were educated by casts, without dissection?—I have heard that there were schools in which the supply of bodies was extremely small indeed.

90. Have you been able to institute any comparison between a school of pupils,

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where dissection has been more frequent, and where it has been more rare?—I think that in what I have already said, I have shown the ignorance of those persons who have had little opportunity of dissection; that they were unaware even of the existence of some parts of the body, and that they were obliged to be rejected at the College of Surgeons, from their ignorance of Anatomy: which is not to be imputed to their want of zeal, but entirely to the want of proper instructions, and of opportunity to learn their profession.

91. Had those pupils who were so rejected, received their education in schools where casts had been used?—I should be sorry to be understood to say, that there is any school in London in which the students have not access to a dead body; but that other means are used to gain instruction I am quite certain; but a lecturer who has two or three bodies in the course of a winter to instruct forty or fifty students, is a man who ought not to be permitted to teach; because it is absolutely impossible a student can obtain knowledge without manipulation, that is, without his having recourse to the dissection of the body; a lecturer who has only one or two subjects to practise on, must frequently resort to these, and they are kept in pickle; and then the student does not dissect at all.

92. You have mentioned that the facilities of obtaining bodies for dissection, and consequently for instruction, on the Continent, are great; have you observed that pupils who are educated in foreign countries, where they have had a facility of dissection, have acquired greater knowledge than those educated in England, where dissection is more rare?—I wish to say, that I do not think the price of bodies should be below two guineas; if bodies are exceedingly cheap, as they are in France, the result of their being so is, that they are less valuable to the student, and they do not take precisely the same pains that they would if a body cost them a little more; but the high price in England operates in a great degree as a bar to dissection.

93. Are you to be understood to say, that the price had been for a body fourteen guineas, and that it is now eight guineas?—Yes; when I first began the profession, it was two guineas; it was then raised to four and six; then to fourteen guineas, and from fourteen guineas it seems now to be fixed at eight.

94. Does not that fall of price rather indicate a decrease in the difficulty of obtaining bodies than an increase?—A supply derived from those sources is extremely uncertain, it may be eight guineas to day and fourteen next week, and at the present moment, notwithstanding there is so high a price, a surgeon who is at present in this room has not been able to obtain a body for a considerable time.

95. How long has the present price of eight guineas obtained now on an average?—I mentioned that fourteen guineas had been given, but it was an occurrence of but a very short duration, and therefore that ought not perhaps to be admitted into the calculation; but the price of bodies has risen from two guineas to eight guineas in the space of about twenty years, and that price forbids dissection to a great part of the students.

96. You stated that that high price arose from the conduct of a particular person who exercised a great influence over the supply?—Yes, from a combination and monopoly.

97. Therefore the argument that there is a greater facility by the lower price does not obtain upon this occasion?—No; there is no facility; the price of bodies is now carried so far, that the pupils are prevented from receiving a proper education; and I assure the Committee it has been observed in the College of Surgeons, that our young men within the two last years have declined in respect to their knowledge.

98. Your suggestion of a public officer to distribute bodies among the schools in London, is of course applicable only to the circle of London, and will not operate upon the facility beyond those narrow limits?—Yes, if there be facility in London, no difficulty will exist any where; because London has supplied Edinburgh, and it has supplied Oxford and other places in the country; if there be a free supply in London, there will be no difficulty in the country.

99. According to your plan of appointing a public officer to distribute subjects, would he have to distribute them throughout the kingdom, or in London only?—He would be confined to London.

100. Would you consider it desirable for the supply of the schools of Anatomy in Scotland, that a director should be appointed at one of the ports there?—It would be very desirable.

101. Could the partial supply of bodies from the Continent take place in the time of war?—No; not from the country with which we are at war.

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102. The same system of regulation you have proposed for London, might be adopted in Liverpool and other great towns?—Yes, there would always be a ready supply in the country, if there was a great freedom of supply in London.

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Benjamin Collins Brodie, Esq.; called in and Examined.

103. YOU are surgeon to St. George's Hospital, and teacher of surgery in the school of Anatomy in Great Windmill-street?—I am.

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104. It is almost needless to ask you what degree of importance you attach to dissection, both as regards the practice of surgery and of medicine?—There can be no knowledge of surgery without it, and very little knowledge of medicine.

105. Can Anatomy be sufficiently learnt in any way but by dissection of the actual body?—Certainly not.

106. Can a practitioner be expected to possess the necessary skill and courage to perform a difficult operation, if he has not already performed the same operation on a dead body?—It is of great importance that he should perform such operations on the dead body as can be performed on it.

107. Is it not desirable therefore that there should be a supply of subjects, not only for teaching a student the structure and functions of the human body, but also for enabling him to practise all the principal operations which he may be required to perform on a living body?—Undoubtedly.

108. Is it possible to teach Anatomy well by casts, or any similar sort of preparation?—Quite impossible.

109. Are you aware that there are any schools in London in which an attempt is made to teach Anatomy by casts, or any sort of preparation, and without the aid of the actual subject?—I believe there are one or two persons who introduce drawings, and perhaps casts and other models, to a certain extent, but I am not aware that any person undertakes to teach Anatomy absolutely without a dead body; there is a great difference in the number of bodies dissected, and some persons attempt to teach Anatomy with very little dissection; they teach it of course very imperfectly.

110. Do you not think that the greatest injury is inflicted on society, both on the rich and on the poor, by the ignorance of Anatomy?—I should think a great injury indeed, beyond what society in general imagine.

111. What inconvenience, if any, have you experienced in the course of your teaching, from the difficulty of obtaining a supply of dead bodies?—I have not had much personal experience of the difficulty which exists, as several years have elapsed since I taught Anatomy; I have for the last sixteen years only lectured on surgery, for which I do not generally require more than one or two bodies in the season; but I hear from teachers of Anatomy and from students, that the difficulty is very great; I have even for my surgical lectures sometimes been obliged to wait a good while before I could procure a subject.

112. Requiring only one or two bodies, you have still experienced some inconvenience from being obliged to wait?—I have.

113. In what way do you understand the present state of the law to operate upon the practice of dissection?—I suppose the practical operation of it is limited to the difficulties in procuring bodies from burying grounds; but I am informed that the operation of it might extend much further, if the law was strictly enforced; and that it is to be regarded as a misdemeanor to possess a dead body, without being able to account for your having obtained it by legal means.

114. Have you seen the report of a late trial at Lancaster?—I have.

115. Have you had several interviews with the Secretaries of State, both of the present and of the late government, who have done every thing in their power to alleviate, as far as they could consistently with their duty of seeing the laws obeyed, the evils which the teachers of Anatomy now experience?—I had several interviews last year with Mr. Peel upon the subject, and one with Mr. Spring Rice; both these gentlemen appeared to be exceedingly anxious to do all which was in their power to do; Mr. Peel gave the subject much consideration, and did a great deal by removing impediments to the importation from abroad of dead bodies.

116. What difficulties were experienced in importing dead bodies?—Very little actual difficulty in the importation on this side of the water, after Mr. Peel's interference; but there were difficulties on the other side of the water, that is in France, so that very few could be procured from this quarter; I understand also that there were difficulties in procuring them even from Ireland; but the worst part of the business, if my information has been correct, is, that bodies come over in a very putrid state,

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and very few of them fit for use ; no antiseptic process was used, or probably more might have been done.

117. You think by an antiseptic process, the bodies could be brought more fit for dissection ?—Yes.

118. Did not considerable difficulties arise from the apprehensions of the masters that their ships, if it became known what they were carrying, would be deserted by passengers ?—I believe there was some difficulty of that kind.

119. Did not the police interpose some difficulties ?—On one occasion, the Thames police did interpose some difficulty ; but it was removed by a stronger hand.

120. In what way do you think the public mind is affected by giving up the bodies of murderers for dissection ?—I think on the whole the effect is injurious ; at the same time it appears to me, that some of my friends regard it as being more injurious than it really is ; on the whole it would be better, as far as Anatomy is concerned, that the practice were abolished.

121. The same objection would apply to the giving up the bodies of suicides ?—Yes, certainly.

122. Perhaps to a greater degree ?—Probably so.

123. Can you suggest any method of obtaining subjects for dissection, by adopting which, the practice of disinterment might be superseded ?—It appears to me, as I suppose it does to most other persons, that the objections which may be made to dissection, arise from its injuring the feelings of relations and friends ; the being dissected, cannot matter to the poor dead carcass ; the fittest persons in society for dissection, are those who have no friends to care about them ; the dead body of course does not feel either injury or disgrace, and where there are no friends to feel it, the mischief to society can be none at all.

124. Do you consider, that the body of a person who has died a violent death in perfect health, is a more favourable or a less favourable subject for dissection, than the body of a person who has died by disease ?—I should think the state of the body depends very much upon the mode of death ; a man who destroys himself by cutting his carotid arteries, makes a very good subject for dissection.

125. Can a body be preserved as long, which has died suddenly, as that one which has been attenuated by disease ?—Yes, I conceive so in general ; it depends on the mode of death, and those who die through some diseases, putrify much sooner.

126. There is no general rule ?—No.

127. You heard that part of the evidence of Sir Astley Cooper, which related to the giving up the bodies of those who die in workhouses, and are unclaimed ; do you concur with him in opinion ?—Yes ; I do believe that is one of the proper sources from which the anatomical schools should be supplied ; but in what manner the procuring the supply from them can be accomplished, is another question.

128. As to the particular enactments, you do not give any opinion ?—It appears to me, that if any positive enactment were to be made by the legislature declaring that the bodies of a certain class of individuals were to be selected for dissection, and others not, it would create a great alarm, and a great feeling of disgust among all classes of society ; but it appears to me also, that the thing might be accomplished in another way. The custom cannot well be introduced at once ; it would be too great a change in the habits of society altogether ; but I conceive that by some negative enactment, if I may use the expression, the custom might be gradually introduced, and that in a few years there would be no feeling against it. In my remembrance, it was not a very common thing for the bodies of those who died out of hospitals to be examined as we term it, that is, to be partially dissected ; but those who are only ten or fifteen years older than I am, tell me that in their time it was much less common. In short it was much more difficult formerly than it is at present to persuade people, especially those of the poorer classes, to submit to the examination of the bodies of their friends ; now the difficulty is so little, that there is hardly a practitioner in London, in practice amongst the lowest description of persons, who does not examine the bodies of a great many of those who die under his care. Altogether, I believe that the prejudice against dissection is much less than it was twenty-five years ago.

129. Do you find that in the upper classes too ?—Yes, I think it is quite as little among the higher as among the lower.

130. Will you state what you meant, in your last answer but one, by a negative enactment ?—The Committee already know that a great number of persons die unclaimed in workhouses and hospitals, without a relation, or friend, or even acquaintance, to care about them ; some of those at the hospitals are now given up for dissection, that would

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would not have been given up twenty years ago. The hospitals however would not supply a sufficient number, while the poor houses would supply the number over and over again. There are some of the overseers who have a strong feeling against dissection, and I suppose would not very readily give up a body; but there are others who see the thing in what I conceive to be its true light, and would be glad to do so, if they were legally justified in it. I have reason to believe that there is one parish workhouse from whence a great many bodies have been sent to an anatomical school, with the consent of the master of the workhouse and the churchwardens; I am informed also, that the churchwarden or overseer of another parish says, that if he could give them up he would; but he is afraid he might get into a scrape if he did so. The first thing to be done then is, to declare that dissection, for the purpose of obtaining knowledge that may be useful in medicine and surgery, is legal and proper. It might then be enacted, that it is not lawful knowingly to dissect the bodies of any persons without the consent of their relations or friends, or executors, or legal representatives; and this clause might be so worded as to include the overseers and churchwardens of parishes under the latter denomination, in cases of persons dying without friends in poor-houses; and it might be further enacted, that even with their consent, no body shall be dissected, if the individual had by his last will and testament expressed his wish to the contrary. Now if some such declaration and enactments as these were made by the legislature, I have no doubt that a supply of subjects, to a certain extent, would be immediately obtained by the purchase of them from the friends of the deceased, and that the custom of obtaining them from other sources would become gradually established.

131. You would be much more favourable to a permissive than a compulsory enactment?—Yes.

132. Are you aware of the trial of the King against Young, in which a surgeon, a parish officer and another person, were indicted for a conspiracy, and found guilty, for preventing the burial of a person who had died in a workhouse?—I am not; if it was thought necessary, it might be declared that those bodies were all to have christian burial after dissection; in the majority of cases the whole body would be buried, and in other cases a great part of it.

133. Do you think that when the result of the late trial at Lancaster comes to be known (at which two students were found guilty of a misdemeanor for taking into their possession, with intent to dissect, a dead body, at the time knowing the same to have been disinterred,) it will tend materially to deter teachers and students from receiving subjects obtained in the usual manner, and thereby to stop the practice of dissection?—I do not know that it has yet done so, but I think it must operate hereafter to a certain extent in this way; as it is, the difficulties of getting bodies are so great, and there is so much annoyance and plague in managing that part of the concern, that a great many of the anatomical teachers are disgusted with their occupation.

134. Do you feel yourselves in a more distressing position, since you have learnt from this trial what the law is, than you were before?—I have not much actual inconvenience myself, for I am not now a teacher of Anatomy; but a friend of mine, who is nearly retired from the teaching of Anatomy, told me he was led to retire because he was worried to death by the difficulty of getting dead bodies.

135. Are you aware that in Scotland there are several instances to that effect?—I think that very likely, as the difficulties are greater there than here.

136. Are you aware that some of the teachers of the private schools are retiring, in consequence of the increase of the difficulties?—It is extremely probable.

137. Do you concur with Sir Astley Cooper in his statement, that there are 700 medical students in London?—I should not think there are above 500 actual dissecting students.

138. What should you think a fair supply of subjects for dissection, per pupil, in the course of the year?—I should think that the number necessary is generally over-rated; I doubt whether there have been hitherto more than 500 bodies actually dissected in London in the course of a year; and indeed, from such knowledge as I have on the subject, I should think that exceeds the number.

139. The question relates to the number that would be necessary in order efficiently to teach, both the structure of the human body, and the mode of performing operations on the body?—I doubt whether more than 600 bodies are necessary, or perhaps 700.

140. Supposing the enactments were made which you recommend, do you conceive that the offensive practice of exhumation might be altogether got rid of?—I think

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it might be by degrees ; but if such a declaration were to be made by the Legislature, and another law made, making it a greater crime than it now is to exhume, the schools would suffer great inconvenience.

141. Are you of opinion that the principal surgeons would do all they could to the discontinuance of the practice of exhumation, if they could get bodies by any other mode of supply ?—I should think so.

142. Are you aware of the character of the men who supply the bodies by exhumation ?—Yes, they are as bad as any in society ; and when I consider their characters, I think it is a dangerous thing to society that they should be able to get ten guineas for a body.

143. You are of opinion, therefore, that by tolerating exhumation, you are in fact tolerating the existence of a set of the most depraved men in society ?—Certainly ; theirs must be a great school of vice.

144. There being usually some reluctance on the part of patients and of their friends to their being sent to public hospitals, have you any means of judging whether much of that reluctance proceeds from an apprehension of their being subject to dissection in case of death ?—I do not know much of the reluctance ; I see gentlemen's servants, who live in luxury, think themselves rather ill treated if sent to an hospital ; but the poor are very glad indeed to get there, and at our hospital, we frequently send away three times the number we have beds to receive ; the poor people, at our end of the town, are going about striving very anxiously to get letters to hospitals ; they are not received into the hospitals at the west end of the town without letters from governors, except in case of accident.

145. You believe there is not much indisposition on the part of the friends to their going to the hospital ?—None at all ; at least it depends on their grade in society, and not on the fear of dissection.

146. Is there much disinclination on the part of the poor to gain admission to those hospitals which have dissecting establishments attached to them ?—Not that I am aware of ; we have no dissecting establishment attached to our hospital.

147. Do you think there is an apprehension on the part of the patients in hospitals, that in case of dying, they will be subjected to examination ?—What is to be said on that part of it, will serve to illustrate the subject generally ; I have understood that in most of the parish infirmaries, for example, there is a great difficulty in examining bodies ; it is not to be done without the consent of the relations and churchwardens or overseers, and the consent is often refused. I believe it is the case also in some hospitals, at any rate it used to be so, that the bodies cannot be examined without the form of permission of the friends ; in our hospital it has always been considered as a rule that every body who died was to be examined, and we have had no difficulty about it ; perhaps once in two or three years there comes a poor woman to pray that her child or her sister may not be examined, because it was her wish that she should not ; but it is very rarely that there is any such application, either before or after death ; they consider the examination as a matter of course, and think nothing about it.

148. It is your opinion that the dislike to the practice of the examination is on the decrease ?—I believe so.

149. Should you extend the same remark to the practice of dissection ?—Examination is in fact dissection to a certain extent ; the more people's minds are familiarized to dissection, the less they think of it. Those who live in the neighbourhood of an anatomical school think nothing about it ; I remember some years ago, it so happened that several bodies, I believe as many as ten, were brought into the dissecting room in Windmill-street in the middle of the day ; and many persons in the street must have known it, and it did not excite the smallest attention among them, they were accustomed to it.

150. Is there any thing further you have to state with respect to the difficulties of obtaining dead bodies, or the remedies to be adopted ?—Mr. Peel had a plan for giving up the bodies of those dying in the hulks, which would make a certain number, about fifty or sixty in the year, if they were all sent up, and I understand there is not one of them that ever has a friend or relation to come and visit them before their death, or to see about them after it ; so it used to be in the hulks at Portsmouth, while an acquaintance of mine was employed there officially.

151. Are they given up now ?—I believe there is a difficulty in the way of their being given up, on account of the Act of Parliament requiring they should be buried, and the funeral service read over them.

152. Might not that be complied with after dissection ?—It might.

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153. What number of subjects do you think each pupil should have dissected before he is permitted to practice?—The fact is, that the great mass of pupils cannot have what I would call a complete education.

154. Supposing them to have a complete education, what number of subjects do you think they ought to have?—A complete education ought to occupy four or five years; but the majority of the students are in London not more than a year and a half.

155. Do you conceive that a person ought to be allowed to practice who has not dissected five bodies?—Yes; it cannot be helped. The majority of students cannot have a very complete education, at any rate not under the present system. The law requires those who are to practice as apothecaries, and those are twenty-nine out of thirty, to serve an apprenticeship of five years; so that five of the best years of a young man's life are disposed of, before he can enter on his studies in London. Then, setting aside the expense of lectures, dissections and hospital attendance, the expense of living in London for four or five years is very great, and such as not many can afford. There are very few medical practitioners who have any prospect of obtaining any thing but a very moderate income by their best exertions, and therefore there are but few among those whose means are ample, who have any inducement to enter the profession. A young man who looks forward to getting 300 l. a year in a village in Wales, will not spend a large sum of money on his education. If a more extensive system of dissection could be introduced, this might be rectified, as in that case very good medical schools might be established in Birmingham, Liverpool and other large provincial towns, where the young medical men in the neighbouring districts would be educated at a much less expense than in London.

156. Should you consider it desirable that he should dissect five bodies rather than one?—Yes, that he should have the opportunity of dissecting them, if he has time to do so.

157. The question put to you did not so much relate to the actual number now dissected with the limited means the students have of obtaining them, as to the number which you think it would be desirable they should dissect, were subjects to be had at low prices and abundantly?—If each student dissects on an average a body or a body and a half in a year, that is, two or four students taking a body together, which is the usual course of things, it will be found that the students who are diligent will obtain a great deal of dissection; and in that case each student, who is to have what I would call a very complete education, will require even more than five bodies before his education is over.

158. Do you include in that answer the bodies which it is considered as desirable that the students should be supplied with, in order that they may perform upon them surgical operations?—Yes, for that purpose two bodies would, on many occasions, serve several students.

159. Could each student in that way perform the same operation?—Not quite; because there are some operations which could be done only once on each body; but there are others which could be performed several times on the same body. I think if there were four hundred and fifty or five hundred students, making allowance for those among them who are idle and who will not dissect much, and also for those who will dissect a great deal, five hundred bodies would be sufficient for their dissection in one year, and two hundred more for their operations: of course it is impossible to give a positive opinion upon such a subject till the case is tried, it is matter of experience.

160. Do you know the number which is generally performed upon by a pupil who enters for dissection at Paris?—No; but if my information be correct they do not dissect much, and the French students on the whole are not so good anatomists as the English; but I apprehend that is as much attributable to national character, as to the cause mentioned by Sir Astley Cooper, namely, the superfluity of subjects.

161. The proficiency of students will depend in some measure on the excellency of the demonstrator or teacher?—Yes; nevertheless I am informed, that on the whole there are fewer good anatomists among the French than among the English students.

162. Do you extend that also to the teachers?—No, certainly not; I believe them to be good.

163. Do you not think that they are as a class superior to ours, especially in morbid Anatomy?—Perhaps their physicians cultivate morbid Anatomy more than ours do; I do not believe that their surgeons do.

164. Supposing an eminent surgeon has said it required three or four bodies for a

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* Quarterly Journal
of Foreign Medi-
cine and Surgery.
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student in a year, does it occur to you how that is to be reconciled with your opinion?—I think that is an over calculation; I do not know what he is to do with them; there is no time to use them; the bodies must be wasted.

165. Do you think that the students of surgery in London, after completing their education, would be able to go through the following examination which takes place at Vienna*. “One of the public examinations for the degree of master in surgery, consists in the performance of certain operations on the dead body; the operations are determined by lot; the candidate describes the surgical Anatomy of the parts; lays down the indications for the operations; performs them upon the dead body which is before him, and applies the proper bandages.” Do you think that the students, as they now quit the schools, after having gone through the two courses of dissection, would be able to acquit themselves of a trial so severe as that?—No; not those of ordinary education. I think that two courses of dissection is a very imperfect education indeed; and instead of two courses of dissection which occupy one year, four or five years are necessary to complete the education of a surgeon.

166. Do you think the students of Dublin have an advantage over the students in London, from the facility with which the bodies are procured?—I believe the majority of them are better anatomists than the English students.

167. You have heard that there is an abundant supply of dead bodies to be obtained in Dublin?—Yes.

168. Are you aware that the candidates for the diploma of the College of Surgeons appear to be well or ill instructed, according as they came from schools where facilities are given for dissection?—I cannot speak from experience, not being an examiner; but I have heard so.

169. Have you known any injury done to the health of English students, towards the close of the season of tuition, from their continual exposure to bodies in a state of putridity?—I think the health of many students suffer from their being too long in the dissecting-room; but they generally have got their dangerous diseases from opening recent subjects, not from putrid ones.

John Abernethy, Esq. called in; and Examined.

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Esq.

170. ARE you surgeon to St. Bartholomew's Hospital, and lecturer on anatomy and surgery there?—I was surgeon; I am not now.

171. Will you state your opinion as to the importance of dissection for students in anatomy, surgery, and medicine?—It is of the highest importance to the public; nothing in life, I believe, that can be considered as more important; it is the foundation of all medical knowledge. Anatomical knowledge is not merely requisite in order that we may perform operations successfully, but it is the foundation of physiology; and the knowledge of the structure and functions of the organs and parts of the body is the sole source of our knowledge of disease.

172. You would state it therefore generally to be your opinion, that the practice of dissection must be protected and encouraged under any circumstances?—Unquestionably; it would be little less than the commission of murder not to do it; it would be a cause of the greatest aggravation of human sufferings. The subject which is now urged on the consideration of Parliament by the necessities of the medical profession, has been one that has excited the utmost attention and endeavours of all the teachers of Anatomy in this town for a great number of years. It is between fifteen and twenty years ago that we endeavoured to get the subject submitted to the consideration of His Majesty's government, of the magistrates, and of the directors of eleemosynary establishments, through the intervention of the Colleges of Physicians and Surgeons; and here is a paper to which they all subscribed their names at that time.

[The Witness delivered in the same, which was read, as follows:]

THE undersigned, who are or have been teachers of Anatomy, respectfully represent to the Royal College of Physicians and Surgeons, that in their opinion the following subjects should be submitted for consideration to the government of the country, its magistrates, and the directors of eleemosynary institutions:

1st. Medical or chirurgical knowledge has never been acquired and augmented, but in proportion as Anatomy has been practically taught and studied.

2d. The importance of medical and chirurgical knowledge, although universally admitted, is never clearly understood nor strongly felt by individuals, until such knowledge be urgently required. A few instances will sufficiently illustrate this truth. The industrious parent of a numerous and happy family may, even in the vigour of life, in consequence of neglecting the faulty actions of some important organ of his body,

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body, suffer disease to become established, and may thence prematurely perish; leaving the individuals of his family a burthen to society, and an affliction to each other; whereas an intelligent physician could have warned him of the dangers of such neglect, and have shown him how these errors, the precursors of incurable disease, might have been corrected, and their fatal consequence prevented; yet no physician could do this without a knowledge of the structures and offices of the several organs which compose the human frame, for the knowledge of the healthy actions of organs can alone enable him to distinguish and correct those which are unhealthy, and which, if continued, must prove fatal. A man having that common infirmity, a rupture, might revile those who dissect the dead body; but when the protruded bowel shall be strangulated, his rupture, if left to itself, must bring him to a certain and most painful death; yet he might be relieved from agony and destruction by a simple and secure operation, when performed by a person conversant with Anatomy, though dangerous in the extreme when attempted by hands not sufficiently practised in dissection.

3d. From conviction of the importance of anatomical knowledge to health, maintenance of life, and the happiness of the community, the legislature or police of almost every other civilized country has provided means for teaching Anatomy, whilst in this the teachers of so important a science are obliged to depend upon persons of doubtful character for the necessary supply.

The College of Physicians and Surgeons properly require that candidates for admission as members should have frequently dissected, and should be perfectly acquainted with the situation, structure, connections and functions of every part of the human body, and must therefore, as they regard the "common weal" for which they were instituted, deeply regret that the opportunities of obtaining such requisite information are very deficient.

4th. There are in this and in every country many persons who die without relatives or friends surviving them, and if the public could be reconciled to their remains being made the subjects of anatomical investigation, the disinterment of those of others for this purpose would never be necessary.

5th. Whilst, however, this necessity exists, it is surely wise and benevolent to suppress the publication of the discovery of an act which may painfully agitate the minds of individuals, but which, in the present state of society, is indispensably necessary to the general good.

The disinterment of a body cannot, it is presumed, be considered legally as more than a trespass; and in a trial for this offence, in which its necessity was argued before Lord Kenyon in the Court of King's Bench, his Lordship sentenced the offender merely to a small fine without any imprisonment; yet some magistrates, influenced by a natural feeling, and without reflecting on the necessity of the deed, have punished persons convicted of this offence with the utmost rigour of the law.

(signed) William Blizard, Chairman of the Anatomical Society.

John Abernethy,	T. J. Armiger,	Matthew Baillie,	} Members of the Society.
Charles Bell,	B. C. Brodie,	Henry Cline,	
Edward Coleman,	Astley Cooper,	H. J. Frampton,	
Joseph Henry Green,	John Haviland,	R. C. Headington,	
Everard Home,	Christopher Pegge,	John Shaw,	
Edward Stanley,	H. L. Thomas,	James Wilson,	

173. What was the date of that paper?—I cannot state; I know it was before I had any concern in the administration of the College of Surgeons; and it must therefore have been between fifteen and twenty years ago. I think that what is done in Dublin ought to be attended to by persons in this country; in Dublin, it is directed that the paupers buried at the public charge, should be interred at a distance from the city. The magistrates of that country have the good sense to perceive that it is not right to punish, with the utmost severity of the law, the trespass of disinterring some of those bodies, when the act is so indispensably requisite to the nearest and dearest interests of every living being. The law remains; they may punish the trespass with great severity, if they find it has been conducted indecorously, or without the utmost possible attention to conceal it from the public. The knowledge of this fact excites no inquietude in the mind of the poorer classes of society; they think not of it. Bodies are distributed by the police in Paris and in other places at noon-day; they are sent in covered carts, on which is written *pour le service Hotel de Dieu*, or any other hospital, and they scarcely attract the attention of those who pass them; I state this to show how soon the public mind accommodates itself to circumstances. If the directors of eleemosynary establishments would but agree to consign the bodies of friendless paupers as subjects of dissection, I have no doubt that they would be fully sufficient for the exigencies of medical science. As soon as I knew that an inquiry was likely to be made by a Committee of the House of Commons, I immediately instituted an inquiry into the average number of paupers buried by a large parish, in different parts of the town; because I knew that the ratio of unclaimed bodies

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must vary according to the situation of the establishment; at present I have received information only from one parish, which buries 400 paupers annually, at the cost of 400*l.* to the public. Of these, one-fifth or 80, are said to be absolutely without friends, or are unclaimed. I have therefore the strongest belief, that if the directors of these establishments would but concede, that absolutely friendless paupers should be made subjects of anatomical instruction, this supply would be adequate to the exigencies of the profession.

174. Do you deem the continuance of the practice of dissection so important, that if no supply of bodies could be obtained in any other manner, you would think it wise to go on tolerating the practice of exhumation?—Unquestionably; for I see that the welfare of society is vitally concerned in the attainment of anatomical knowledge.

175. Would you prefer any other means of obtaining a supply?—No doubt; there would be no exhumation, if this was conceded.

176. The Committee collect from a publication of your own, in which there is the following passage, that at one period you had a conference with the government on the subject:

“I know that the necessity of the case became a subject of deep interest and consideration to men of the first intellect, knowledge and rank, in the kingdom. It was not long after the commencement of the last war, that the detection and trumpeting forth of an offence of this nature induced a Member of Parliament to move for a bill to make it felonious. I, with others of our profession, stated to those in power, that there were at the time more than 200 young men who came up annually to London to obtain a stock of anatomical knowledge, which was to last them throughout their lives, and that at the conclusion of the season, these students were employed in the army and navy, where their services were there greatly wanted. I begged those with whom we had the honour of conversing, to reflect on the consequences of sending forth these young men in ignorance, to torment and increase the hazard and sufferings of their valiant countrymen. Every conversation ended in this decision, that the study of Anatomy was indispensable, and must not be impeded.”

You completely adhere to that your former opinion?—It was the opinion of all those gentlemen with whom I had at the time the honour of conversing.

177. You would consider it highly desirable, however, that if possible the supply of subjects should be obtained without having recourse to the practice of exhumation?—No doubt.

178. Have you thought much upon the detail of the methods that might be adopted for obtaining a supply from parish workhouses?—The teachers of Anatomy, though so interested in the subject, did not venture to apply to the legislative department of the country, because they did not know how any law could be framed that would not be liable to a great number of objections. But I have a strong hope, that if those gentlemen that the public look up to with respect and good opinion, those that have authority, would but declare it as their sentiment, that unclaimed bodies should be given up as subjects for dissection; that then the directors of poor houses, hospitals and prisons, might make a general regulation to that effect.

179. Is the supply obtained by exhumation sufficient or not for the wants of the pupils?—By no means sufficient.

180. To what particular causes do you attribute the present difficulty of obtaining a supply?—To the vigilance of the public in watching all the depositories of the dead.

181. What is the number of subjects that a student in surgery, for his complete education, ought to dissect?—I think with Mr. Brodie upon this subject; that if two students were to dissect a body yearly, observing at the same time the dissections made by others, and that they were two years in completing their education, and had likewise a third body allowed for the performance of operations, they would become very competent surgeons; I will not say perfect surgeons, because the labour of an education to qualify a man to be a perfectly good surgeon, is beyond all belief; half his life must be consumed ere he can be considered as a proficient.

182. Would not the number of pupils increase with the facility of acquiring instruction?—Undoubtedly, the number in this country; because now many go to other countries to learn Anatomy.

183. You cannot ascertain the number which would be requisite from the present number of pupils in London?—I cannot answer precisely.

184. How many bodies is each pupil in St. Bartholomew's hospital required to operate upon in order to learn the best known operations of surgery?—Very few, indeed; for that would be spoiling the body, which it is better they should dissect.

185. And yet, would you not consider it desirable, for a perfect course of instruction,

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instruction, that each student should have performed each known operation on the dead body, before he presumes to perform it on the living?—Doubtless.

186. Considering that, and your late answer as to the number you consider it desirable for a student to dissect in the course of a year, do you continue to think that, and if operations are to be performed by the students on a dead body, one body between two pupils would be sufficient in the course of a year?—Yes, if their education was to continue for two years, and an additional body allowed for the performance of operations.

187. That would in the whole be three bodies between two pupils?—Yes, the more they dissect the better; but I speak of an ordinary education.

188. You are understood to say that very few pupils who quit the London schools, have learned the actual operations by performing them on a dead subject, before they are called upon to perform them upon the living?—I believe very few indeed; but we consider that a person who is thoroughly conversant with Anatomy, and has seen operations performed, will be very capable of performing them with dexterity and security to the patient, though it is his first operation.

189. Is he not likely at the moment of operation to lose his presence of mind, if he has never before used the knife in that particular operation?—I think that those who have not presence of mind, will want it when they perform an operation on the living body, however conversant they may be with the operation on the dead; and those who have presence of mind, who are good anatomists, and have seen the operations performed, will be able to perform it in a very perfect manner.

190. Do not you think that a person is more likely to lose his presence of mind who has never performed the operation on a dead subject?—I decidedly think operations ought to be performed on the dead subject.

191. Do you not think that the extended diffusion of anatomical knowledge from the facility of procuring bodies, would be more beneficial to the poor than to the rich, since the rich can afford to pay for qualified persons who have been enabled to instruct themselves in foreign countries or in this, at the expense which may be required?—Certainly.

192. What is your opinion of the character of those persons who are employed as exhumators?—That they are a very bad set of men.

193. Do they even act with good faith to the gentlemen who employ them?—It cannot be expected that they should.

194. Is it not the case that they sometimes give information against the very persons whom they undertake to supply?—I cannot accuse them of any breach of faith with myself.

195. Is it necessary for the purposes of Anatomy, that some subjects should be had that die in a state of health?—I do not think it is; the structures are the same, and if we know them, we can readily imagine the difference of their appearance in a healthy person.

196. Do not you think that the facility to procure dead bodies would be increased, if the stigma attaching to the dissection of murderers were removed?—I do not think such stigma affects the public mind; yet we gain so little by obtaining the bodies of murderers, that we should have no objection to its being removed.

197. At the time of adding the dissecting establishment to St. Bartholomew's Hospital, did you find that the number of persons claiming admission fell off?—Not at all.

198. You do not believe it would occasion any alteration?—I am sure it would not; there is an hospital in this town where the poor know that most of the bodies are dissected, and yet applications for admission there are as numerous as in other hospitals; the poor go into hospitals because they are ill and in a state of penury; and do not think that they are to die there; or if they do, they care not what is to become of their remains.

199. Do you concur in the opinion of Sir Astley Cooper, that the supply of bodies may be redundant, so as to occasion negligence, as in the hospitals abroad?—Unquestionably, the supply may be so great that students are likely to be less attentive.

199*. So far from promoting science, such a redundant supply would rather impede it?—It would depend upon the character of the students; some would profit according to the abundance of their opportunities of acquiring knowledge. The English students are in general very industrious.

200. Does that character follow the English student, when he goes abroad to learn surgery where the supply is abundant?—I believe it does; I have heard it
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said, that it is remarked by the profession in Paris, the diligence with which the English students dissect, in comparison with their own countrymen.

201. What is the degree of knowledge acquired by pupils brought up in foreign hospitals where dissections are frequent, contrasted with the knowledge acquired in the schools here, where dissections are rare?—I have had no opportunity of ascertaining.

202. Is it generally understood, that the science of Anatomy is carried to a greater height in France than it is in England?—I believe there are some individuals in France who have wrought at dissection to a greater extent than any in England, because they possess greater opportunities.

203. You are probably aware that Anatomy is taught at Paris to a large number of English students, under the superintendence of English surgeons?—I know it has been.

204. Do you think that greater facilities to the home supply of bodies would be preferable to an increased supply from abroad?—The importation of bodies is quite out of the question; I believe the police of Paris would never allow it, it would be giving a bonus to their competitors.

205. The price being seven shillings in France, and eight guineas in England, if no impediment were offered to the importation, would there not be a great influx of bodies into this country?—The police of France would not permit it.

206. Whether the present supply of from 450 to 500 subjects a year be sufficient, or whether a larger supply be wanted for surgical education, you would equally think it desirable that the supply should be obtained (if possible) in some other manner than by exhumation?—Unquestionably I do, for it is a national disgrace.

207. Would it not be more advantageous to the students to have the dissection of the bodies of persons whom they attended in illness, than those of strangers?—Most certainly.

208. Should the law, in your opinion, be compulsory, or only permissive, which sanctioned the giving up, by public establishments, of unclaimed bodies; and should not such a law apply equally to the bodies of all who died in such establishments, to whatever class they might belong?—Certainly permissive; I have this feeling, that so strong is the necessity, that so much public injury must be done by ignorance of Anatomy, that so correspondent with the principles of justice is it, that those who have been sustained in illness and infirmity at the public charge, and who consequently die in debt to the public, should have their bodies claimed and converted to the public good, that I myself should not hesitate, if I were a member of the Honourable House, to move for leave to bring in a bill to legalize such a proceeding, and to give power to the Colleges of Physicians and Surgeons, and the teachers of Anatomy, to demand the body of any friendless pauper who had been maintained at the public charge; for in that case no feeling is violated.

209. Any friendless pauper dying in a workhouse or a hospital?—Any where.

210. You do not think you should get that supply, without a law authorizing the demanding of the body?—I have stated it as my firm belief, that if it was supposed by the public that such a legislative enactment was in contemplation, the directors of poor houses, and hospitals and prisons would make a general order to that effect; and certain it is, if bodies that were buried at the public charge should be consigned as subjects for anatomical instruction, the supply would then be more than sufficient.

211. You would consider it prudent and expedient in that case, that the surgeon having the use of the body, should afterwards give it decent and christian burial?—I would have the strongest obligation imposed upon him so to conduct the business in every respect as not to give the least offence to public feeling; he should enter into a bond to that effect, and to a considerable amount.

212. Would you not accompany this with very severe penalties on every governor of a workhouse or prison giving up a body to the surgeons, where the friends do claim it?—Unquestionably; but claims may be made by pretended friends, and there should be an allowance for the examination of such bodies.

213. Even though they are claimed?—Yes, certainly; in an hospital we may attend a patient for many months watching every turn of his disease, feeling also most anxious to know its nature, and if we are debarred from examining the body, it must be a great impediment to the progress of medical science.

214. Knowing how the law, as interpreted at a late trial at Lancaster, is likely to bear on professional men who dissect bodies, do you not think it a great hardship on

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on men of character and education that they should be able to obtain the means of instruction only by a violation of the law?—Unquestionably I do.

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215. While the law still attaches the stigma of a crime to dissection, do you think the public feeling is ripe for such a change as that contemplated, namely, that the unclaimed poor should be dissected, their only fault being their poverty or misfortune?—I do not think that the penalty of dissection, in conjunction with that of crime, has any kind of operation on the public mind.

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216. You do not think that public feeling would be outraged in any way by such a change?—I do not believe that the change proposed would at all affect the feelings of the public.

William Lawrence, Esq. called in; and Examined.

217. YOU are surgeon to St. Bartholomew's Hospital?—I am.

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218. Having heard the evidence of some of the former witnesses, will you state to the Committee any thing which has occurred to you, either as to the inconveniences to which the profession are subject, or as to the remedies which you think ought to be applied?—I think that very great inconvenience exists at present from the insufficient supply of bodies for dissection, and that it is highly desirable that some method should be taken to remedy the deficiency; I should concur with the observations made by Sir Astley Cooper, so far as I heard his evidence; and Mr. Brodie and Mr. Abernethy in respect of devoting the unclaimed bodies of persons dying in public establishments; this seems to me the only mode by which the object can be accomplished.

219. There appears to be a difference of opinion as to the number of subjects necessary, on the average, for each pupil to dissect; what is your opinion on that point?—I should think it desirable that a student who is going through his education as a professional man, more particularly if he is to practise surgery, should be able to employ three or four bodies annually for dissection and other purposes. A smaller number than that might be considered to be barely sufficient.

220. Do you know what is the number each pupil dissects at Paris?—I understand there is an unlimited supply, that a person employs as many as he likes.

221. With respect to the practice of exhumation, does any thing particular occur to you?—Nothing more than the obvious observation, that it is a violation of the law, and must be conducted by men of the most abandoned character; they are, generally speaking, capable of any crime.

222. And whom, instead of employing, it is desirable, if possible, to exterminate from society?—Undoubtedly.

223. What is the present price of bodies?—The last that I purchased, I gave ten guineas a piece for.

224. What price did they bear formerly?—When I began the study of Anatomy, they were at two guineas and a half, and a sufficient quantity of them could generally be procured at that price. The number of students in London was much less at that time.

225. Has the price recently fallen?—I am not aware of the price during the last winter, as I have not had occasion to go into the market; but I believe that the price is from six to ten, twelve, and even fourteen guineas.

226. You have enumerated, as one of the causes of the increase of difficulties, the increase of the number of pupils in London; what other difficulties strike you?—I apprehend that is the principal cause, that there is a much greater demand than formerly, and consequently an increased difficulty of supplying it.

227. What is your opinion as to the policy of the bodies of murderers or suicides being given up for dissection?—I deem it highly objectionable, as being directly calculated to maintain and increase the existing prejudices on the subject; it gives the most powerful sanctions, those of the legislature and judicature, to the horror and aversion which mankind are perhaps naturally disposed to entertain against what they deem a profanation of the dead.

228. That would apply still more strongly to the case of suicides?—At least as strongly.

229. If the suggestion that the bodies of all unclaimed poor be given up to dissection, were acted upon, would you see any objection to maintaining the existing law in force, or even strengthening it, against exhumation?—I should conceive none at all; the crime would no longer exist.

230. You think the supply would be sufficient?—I conceive that it would be ample.

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231. And that the law relating to exhumation might remain in its present state?—Certainly.

232. Do you think it necessary to have a positive law, calling upon the governors of workhouses to give up the bodies of friendless poor; could not such an arrangement be made without that?—I think, if the proposition was tolerated by persons in influence, the thing could be done without any positive law; some of the managers of such places may be prejudiced, and entertain narrow opinions upon the subject, but not generally.

233. A learned judge has stated it to be an offence against the law to have any body, other than that of a murderer, in possession for the purpose of dissection; would the repeal of that law, in your opinion, attain the desired end?—I think it would materially contribute; the law on this subject is at present inconsistent, and some change is obviously necessary; the Colleges of Physicians and Surgeons, which are bodies recognized by the law, require that persons should produce certificates of having actually performed dissections before they will admit them to examination for diplomas and licenses, which are absolutely necessary for practising, holding various public situations, and for other purposes; yet, if I rightly understand some recent judicial decisions, the having a body in possession for the purpose of that dissection which the above-named legally authorized establishments require, is in itself a crime, and punishable by fine and imprisonment.

234. Is it not considered a great hardship by the profession that they should be subject to an indictment for a misdemeanor for doing that which, as professional men and as teachers, it is their duty and necessary that they should do?—I conceive it is a great hardship; a man cannot understand, and he certainly ought not to practise, the medical profession, without the diligent study of Anatomy by actual dissection.

235. The law, as it at present stands, is a degradation of the profession?—I conceive so; it places a stigma on what ought to be encouraged, and to be considered as a ground of respect.

236. Is your conviction of the importance of teaching Anatomy and Surgery by dissection so strong, that unless another method be devised for obtaining a supply of bodies, the practice of exhumation ought, in your opinion, to continue to be tolerated?—Yes; bodies must be obtained.

237. But you consider it highly desirable, if possible, to supersede that practice?—Highly desirable.

238. Before endeavouring to introduce the practice of giving up unclaimed bodies for dissection, would it not be desirable, as a preparatory step, to repeal that enactment which associates crime and its ignominy with dissection?—Certainly.

239. Do you anticipate any indisposition, on the part of patients or their friends, to their being sent to hospitals, in case of the unclaimed bodies being given up in every instance to dissection?—Not the least; I quite agree with Mr. Abernethy upon that point.

240. Do you find much indisposition in the higher classes to subject the bodies of their relatives after death to examination, when representations are made that the interests of science require it?—I have found more among the higher than the lower.

241. How many years ought a pupil to be pursuing his studies in London?—The generality of pupils pass two anatomical sessions; that may be said to be the general practice. In order to make a person thoroughly acquainted with anatomy and other branches of medical science, several years are necessary.

242. Do you think that a student ought to be permitted to practise before he has dissected between four and six bodies?—I do not think he ought; I should be sorry he should operate upon me unless he had done so.

243. From what you know of the education of foreign medical students, what is your opinion of their qualifications when first they are permitted to proceed to practice?—They are much better qualified in Anatomy than the English; anatomical knowledge is much more diffused, and carried to a higher extent, in France, Germany, and Italy, than in this country; the cause being partly the greater facility of procuring subjects for dissection in those countries.

244. Do you not consider it essential to a good course of surgical instruction that the student should perform upon the dead body those operations which he will afterwards be required to perform on the living?—I consider it essential; operations cannot be performed on the living body without the risk of serious and even fatal errors, unless the surgeon shall have acquired a knowledge of Anatomy generally, and have repeatedly operated on the dead subject.

245. Are

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245. Are you in the habit of seeing many of the eminent foreign surgeons and anatomists who come to this country?—I see many medical persons from France, Germany, and Italy, and have found, from my intercourse with them, that Anatomy is much more successfully cultivated in those countries than in England; at the same time I know, from their numerous valuable publications on Anatomy, that they are far before us in this science; we have no original standard works at all worthy of the present state of knowledge.

246. You consider that to be partly owing to the greater opportunity of procuring subjects?—Yes, principally.

247. Can you speak to their operations?—Not from personal observation; I find the foreigners who visit this country are generally better informed in Anatomy than we are.

248. What is your opinion as to the proficiency of the English students, who after studying in the foreign schools come to practice in this country?—They are the best class of students we have; they receive a good education in England, and then pursue their studies abroad; they are persons who can afford to expend more money on their education than the generality of students.

249. It would be impossible for them, under present circumstances, to complete their education to so high a state of proficiency in this country?—The expense would be very great; and besides this, the medical schools and other establishments on the Continent afford great opportunities of acquiring knowledge in all branches of medical science, with every facility of access.

250. *Cæteris paribus*, you would say, that those who possess the greatest opportunities of dissection would be the best qualified?—Certainly; I know that many English students have been to Paris on this account, and have returned with important acquisitions of knowledge.

251. You consider that the poor are much more interested in this question than the rich?—Yes; the poor must take such assistance as lies nearest, while the rich can purchase the aid of the best informed.

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Henry Field, Esq. Deputy Warden of the Society of Apothecaries, called in; and Examined.

252. WILL you produce a statement of the number of pupils who have passed their examination before the Apothecaries Company, and the number of those rejected, in 1827?—Between the 1st of January 1827, and the 31st of December 1827, four hundred and nineteen persons received, from the court of examiners of the Society of Apothecaries, certificates of their fitness and their qualification to practice.

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253. Can you state the number in former years?—There was an account presented to the House of Commons which carries this down to the 29th of March 1825 (The Paper N^o 232, of the Session of 1825); our accounts are made out to the 1st of August annually; after the time of passing the Bill, between the 25th of March 1825 and the 1st of August of the same year, four hundred and five persons received certificates of their fitness and qualifications to practise as apothecaries; between the 1st of August 1825, and the 31st of July 1826, four hundred and forty-five persons received certificates of their fitness and qualifications to practise as apothecaries; from the 1st of August 1826, to the 31st of July 1827, four hundred and eighteen persons received from the court of examiners of the Society of Apothecaries, certificates of their fitness and qualifications to practise. As to rejections, from the 25th of March 1825 to the 31st of July in the same year, eight persons were rejected; between the 1st of August 1825 and 31st of July 1826, forty-three persons were rejected; between the 1st of August 1826 and the 31st of July 1827, forty-seven persons were rejected.

254. Can you state to the Committee whether actual dissection is one of the qualifications required?—I had the honor to be one of the court of examiners some years, but I am not aware that actual dissections are required; there is nothing said about it in the printed particulars. I have with me a copy of the present regulations.

[*The Witness delivered in the same.—See Appendix, N^o XI.*]

255. It appears from this that the candidate is required to attend two courses of

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of Lectures on Anatomy, but is not required to have dissected?—I apprehend that to be the case.

256. Has it ever occurred to the court of the Apothecary's Company that, for general practice, dissection would be an important part of education?—No doubt dissection would be an important part; but it has not been insisted on. Our examination does not apply to surgery in the strict sense of the word, it is to the practice of medicine only, and therefore physiology is that which we more particularly look to.

257. Do not those persons who are examined by you, and obtain certificates to practise as apothecaries, usually act also as surgeons in the country?—As a matter of opinion I have no doubt many of them do, without going through the College of Surgeons in London.

258. Would not dissection be an important branch of knowledge to them?—I have no doubt it would; the Society of Apothecaries were desirous to encroach by their regulations as little as possible on the College of Surgeons; dissection is much more important with the surgeons, whose practice is in relation to accidents and external diseases. I have a paper in my hand, containing the names of some provincial schools of anatomy, from which we receive certificates; our regulations are, that they shall be derived from certain quarters only, of whose capability of communicating this knowledge we have received satisfactory information.

259. What are the provincial schools from which the examiners of the Apothecaries Company are in the habit of receiving certificates?—At Liverpool two schools of Anatomy, at Manchester three, at Birmingham one, at Bristol one, at Sheffield one, and at Leeds one; and the schools also in the Universities of Oxford and Cambridge, and in the Universities and from the private teachers in Dublin and Edinburgh, also the Anatomical schools at Paris, are recognized by the court of examiners at Apothecaries Hall.

260. Have you any means of ascertaining what proportion of candidates who take out their diploma at the Apothecaries Company, also take out their diploma from Surgeon's Hall?—Certainly not.

261. What do you suppose to be the legal effect on a person taking out a diploma from the Apothecaries Company, and not from the College of Surgeons, in case he practises as a surgeon?—I am afraid it is in his power to operate wherever he pleases; the authority of the College of Surgeons extends no further than seven miles from London, and they have only a charter, not an Act of Parliament; therefore those persons may practice in any part of the kingdom without taking out a certificate from the College of Surgeons, the charter having not sufficient power to enable the surgeons to prosecute; an Act of Parliament would, and they had an Act of Parliament some years ago, which is unfortunately lost: since that, they have not been able to obtain one.

262. Is not a general practitioner constantly liable to be called upon in the country to perform the most difficult operations on patients under his care?—If he professes himself to be a surgeon and apothecary; probably in the country there are some gentlemen who confine themselves to the different branches only, as some of us do in London.

263. All the gentlemen who present themselves to you, are acquainted with practical anatomy, are they not?—So far we require as to take care that they bring certificates of their having attended so many courses of lectures; then they are personally examined in Anatomy; so that whether they have attended those courses in such a manner as to answer a valuable purpose, is discovered by the examination.

264. Where does the examination take place?—At Apothecaries Hall.

265. Do you think that a person could answer the questions without having had a course of practical Anatomy?—We should not admit them to examination at all, unless they had attended two courses of lectures on Anatomy.

Joseph Henry Green, Esq. called in; and Examined.

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266. YOU are a surgeon to St. Thomas's Hospital, and a teacher of anatomy and surgery there?—I am.

267. Would the number of students at St. Thomas's be greater or less than it is at present, if a greater number of bodies were to be had for the purpose of dissection?—I presume greater.

268. Have you found any difficulty in obtaining the requisite number of subjects?—Very great difficulty.

269. What

269. What is the present price of subjects?—Nine guineas.
270. Is it higher or lower at present than you remember it to have been formerly?—The lowest within my experience has been four guineas, and the highest fourteen.
271. To what do you ascribe its being lower at present than it has been?—That at times there were particular combinations of the resurrection men, accidental circumstances, that lately have not been met with.
272. Do you think that one of the causes of the price being now lower, may be, that in consequence of the high price of subjects the number of pupils entering for dissection has been materially diminished, and therefore the demand for subjects decreased?—I think that is possible, but I have no data on which to give any certain information on that point.
273. Is there not a dissecting room attached to St. Thomas's Hospital?—There is.
274. Do you know whether the number of patients entering the hospital for relief has been diminished in consequence of a dissecting establishment being attached to the hospital?—Certainly not, a great many more apply every week for admission than can be possibly admitted.
275. Are the patients in the habit of expressing any anxiety on the subject of their bodies being examined in case of their dying in the hospital?—They may, but I know of no facts in support of that; and I know of one fact to the contrary, where one of the patients left her body for dissection in the hospital; it is to be observed, however, that examinations are not made without the permission of friends or the order of the coroner.
276. How long ago is it that the dissecting establishment was attached to the hospital?—I can scarcely say, but half a century, 50 years I should think.
277. Are the pupils at St. Thomas's in the habit of being taught to perform operations on the dead bodies?—Very partially, for from the great expense of bodies, the pupils are not willing to obtain them for the mere purpose of performing operations; therefore they seldom make any other use of them than that of dissecting the parts, for the purpose of ascertaining the structure of such parts as may be concerned in operation.
278. Do you not consider it an essential part of a good course of professional education, to be learnt previously to performing operations on the living body, to perform the principal operations on the dead body?—Certainly.
279. The difficulty of obtaining subjects is the sole reason why that practice is not made general?—The sole reason.
280. How many bodies upon the average in the year would you allot to each individual entering for dissection?—If I were to state what would be required for each pupil as to bodies, I would say three; but at the same time certainly there are some parts which, in going over a body of this sort, might be possibly omitted, though it would be very advantageous to the pupil likewise to go over them.
281. Do you reckon three bodies for each pupil?—I think to have such information upon the subject as renders him a safe practitioner, certainly.
282. Do you reckon on the pupil performing the operations on the dead body?—Yes, I should say, two bodies for dissection and one for the performing of operations.
283. How many pupils are there in the hospital?—Average about ninety.
284. What is your opinion of the character of the men employed in procuring bodies for the dissecting schools?—That they are of the worst description; some of them have been actually thieves, and certainly men of very bad character.
285. Is exhumation the sole occupation of the greater number of the persons employed in obtaining bodies?—I fancy not; I fancy that they have other means in general, I have heard so.
286. In case of prosecutions being instituted against the exhumators, and in case of their being imprisoned, are not the dissecting schools called upon to pay extra expenses?—Yes.
287. Is it not a distressing thing to gentlemen of character and education to be obliged to have recourse to persons of this description for obtaining the necessary means of giving instruction to their pupils?—Certainly; it really made me for some years, when I had the immediate conducting of the business, I may say quite unhappy.
288. Is not the general effect of the legal difficulties to which anatomical teachers are subject, sufficient to make their situation extremely irksome?—Yes.
289. Does not exhumation tend to increase the existing prejudices against dissection?—I conceive so, very materially.
290. Have you ever considered what is the effect of giving up the bodies of

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murderers for dissection, as regards the state of public feeling on this subject?—Yes, I conceive it tends materially to strengthen the prejudice against dissection.

291. The giving up of suicides would have the same effect, perhaps, in your opinion?—Yes, in short to make an anatomist the executioner of the laws, must certainly tend to create an odium against us.

292. Have you ever considered what other sources of supply might be had recourse to for the purpose of obtaining bodies?—The bodies of persons unclaimed by relations or friends, the bodies of persons dying under similar circumstances in gaols, certain descriptions of convicts and criminals, and perhaps some might be imported.

293. Can you go into larger detail as to any of the sources of supply which you have mentioned?—I have made some inquiries with regard to our hospital and the Borough parishes with regard to the number of persons dying there that are unclaimed. With respect to St. Thomas's Hospital, however, it is to be observed that security is required, that if the patients shall die there, they will forthwith take away the patient's body, or pay the fees of his funeral to the steward of the said hospital; therefore, the friends are so far interested in the object of removing many bodies that might otherwise be brought into the dissecting room.

294. You think it would be useful to repeal that regulation?—Yes, I conceive so but the answer made to me when I have put it to the authorities of the hospital is, that the hospital would become chargeable with persons who are paralytic, and cannot be removed; but otherwise it would be certainly desirable to get rid of that regulation. Here is a return of the number of patients who have died in St. Thomas's Hospital in the last ten years, distinguishing those removed from the hospital by their friends and securities; and the number of those buried in the hospital burying-ground, separating those buried at the cost of their friends and securities, the several parishes, the corporation of the City of London and the Victualling Office, and the unclaimed bodies buried at the cost of the hospital. The number of unclaimed bodies buried at the cost of the hospital has been, from the year 1818 to the year 1827, sixty-five; but it will be understood that those who are buried at the cost of the City of London might be made available in many instances to our purposes, if they were not required to pay for the burial. On the whole, it does not appear from the account I have here, that perhaps more than twelve bodies could be annually given up for dissection out of those different sources, under the present regulations of the hospital. It appears that in St. Saviour's parish, from the 1st of April 1827, to the 1st of April 1828, there were fifteen bodies that were not claimed. In St. Olave's parish I am informed that the average of unclaimed bodies are twenty-six per annum; but the number of years is not very accurately given out of which that average is taken. In St. John's parish, the average number is thirteen; and in the parish of Christ Church they return only one, who was found drowned.

295. In all those cases you would only propose to take for dissection the bodies of those who are unclaimed by their relatives?—Just so.

296. In those cases you would think it right for the surgeon to give an engagement that christian and decent burial should be given to the bodies after dissection?—Yes.

297. You always suppose, under those regulations, that any existing penal laws against dissection should be repealed?—Yes.

298. Would not internal regulations made by the hospitals be sufficient, without any new law, to remove existing difficulties?—I have made various efforts in pointing out that which I thought might be done to facilitate our views, but have met with difficulties from the authorities of our hospital.

299. Do those difficulties exist in consequence of the state of the laws?—Certainly not.

300. Do you not think that the authorities might change their views possibly on the subject, if the law were made permissive?—I apprehend they might.

301. So that they might not think they were guilty of any offence in appropriating those bodies to the purposes of science?—Yes, just so.

302. Are you aware of the case of "the King v. Young," in which a parish officer, a surgeon and another, were indicted and found guilty of a conspiracy, for removing, before burial, the body of a pauper from the parish workhouse to a dissecting room?—No, I was not aware of that case.

303. From the knowledge you must have of the feelings of the poor, do you not think it would answer the general interests of science better, to let the law be simply permissive, instead of being mandatory, as to the delivering up of a body under any circumstances?—Yes; I think the great object would be to study the feelings of

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of the public; and though we might not in the first instance obtain a sufficient supply, that would afterwards follow.

304. Are you aware that many English pupils now go abroad, in consequence of the facility given at Paris to the study of practical anatomy?—I have known a number who have gone on that account to Paris from our own school.

305. Do you think their object has been to improve themselves?—Directly with the object and view of improvement.

306. Is it not very expensive to them to be obliged to go abroad?—No; they live cheaply, and have the means of education cheaply.

307. That is of course a loss to the lecturers, and persons engaged in instruction here?—Certainly so.

308. Supposing that during the period of their attending those courses in London, which, by the regulations of the College of Surgeons, they must attend in this country, they could obtain an adequate supply of bodies, their visit to foreign schools would be rendered unnecessary?—Yes, certainly; the College of Surgeons in their regulations do not require that any certain number of bodies shall be dissected, which appears to be a defect, I think.

309. They require only that they shall have attended two courses of dissection?—Yes.

310. In the course of your practice, have you perceived any diminution in the dislike which relatives are supposed to entertain of a professional examination of the body of the deceased?—Yes; I think that is the case, that less prejudice exists at present than perhaps some few years back.

311. Do you conceive that a dislike either to the examination or dissection of bodies, exists in a stronger degree among the lower classes of the community than the higher?—Yes; the middling classes perhaps are upon the whole the most prejudiced against it.

312. Do you think that a poor man would consent to a medical practitioner's operating upon him, if he did not suppose the practitioner to be acquainted with the structure of the part to be operated on?—I have no fact on that subject within my knowledge; I should think he would not consent to it, if he were aware of the fact.

313. Are not most of the pupils who resort to Paris in order to dissect, aided and superintended in their studies by English surgeons?—Yes, there have been two teachers that I am acquainted with, Mr. King, and Mr. Bennett there.

314. Do you know whether a greater number of them receive instruction from the English than from French surgeons?—That I cannot say.

315. Do you think it would or would not be expedient to permit magistrates or officers to give up for dissection the bodies of persons who have committed suicide?—No; I should be averse to that.

316. Should you be equally averse to giving up the bodies of those persons only who are found guilty of suicide?—If only those were given up who were unclaimed, they would be included under the former class; but if the bodies of those who have friends were given up, the law must be rendered mandatory.

317. Upon the whole, would you think it desirable that the people in authority should be permitted to deliver up the bodies of suicides for dissection?—No, I think not.

318. Do you think that in the same way that the feelings of the people are rendered adverse to dissection in general by giving up the body of a murderer, they would also be rendered adverse to it by giving up the body of a suicide?—Yes, that is my opinion.

Cæsar Hawkins, Esq. called in; and Examined.

319. YOU are lecturer on Anatomy, and demonstrator in Great Windmill-street?—Yes.

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320. Have you had many opportunities of knowing what are the causes of the difficulties now experienced in obtaining dead bodies for dissection?—The same opportunities that other teachers have had.

321. Are those difficulties at present very great?—They are much greater than they were some years ago, though this year perhaps there has not been the same difficulty as the last year and the previous one.

322. To what do you ascribe the increase of the difficulty?—In a great measure to the increased severity with which magistrates act in case of any discovery, and partly also because those constant discoveries which take place, increase the prejudices

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dices of the people against dissection generally, and cause greater vigilance in endeavours to prevent exhumation.

323. To what extent does that increased severity on the part of the magistrates, which you speak of, go?—To this extent, that the difficulty of obtaining subjects by the resurrection men is much increased, they are more frequently punished, and they meet with greater expenses whenever they attempt to steal them.

324. What have you observed as to the conduct and character of the exhumators?—Their character is extremely bad, so that every year almost, we hear of some of them being convicted of other crimes, such as house breaking or stealing.

325. With very few exceptions, have you any doubt that the greater number of them obtain their livelihood by other means than exhumation?—A great number certainly must have other means.

326. Is it not then the duty of the magistrates, inasmuch as the exhumators are principally thieves, to endeavour as much as possible to put them down?—Certainly.

327. No blame therefore can possibly attach to the magistracy for exercising severity against the resurrection men?—It arises duly from the state of the law, which prohibits the only modes which remain for obtaining subjects.

328. Has it been considered by the professors at the anatomical schools, that they were indictable for a misdemeanor, for receiving possession of bodies for dissection, supposed to have been exhumated?—I believe it did not occur, it did not to myself, and probably not to others, till the present year, when a conviction took place which proved we were indictable as accessories in a misdemeanor. The only bodies which the law recognizes as liable to dissection, being those of murderers, the resurrection men can only obtain them by illegal modes, and therefore as conniving in an illegal mode of obtaining them, we are ourselves indictable.

329. Have you any doubt that the professors and students at the different dissecting schools, if the law, as now interpreted, were acted upon with strictness, are all indictable for misdemeanors?—Every one of them, according to this recent decision.

330. Have you ever considered what other modes might be had recourse to for obtaining a supply of bodies?—I have understood from many inquiries, there are a great number who die in different eleemosynary institutions, work houses and hospitals, who die entirely without friends, or merely where persons come to inquire whether they have left money or clothes which they can claim; many who die entirely without friends, and others who attend to them, so far as they can profit by them, but do not attend their funerals afterwards. These might be given up for dissection.

331. You mean, that those who die wholly without property in the workhouses, are generally left to be buried at the expense of the parishes?—Certainly; and some of them have their friends following their funerals, others have not.

332. What number of the students, quitting the schools after the two courses of dissection required by the rules of the Surgeons College, have performed surgical operations upon dead bodies?—I believe scarcely any of those intended to practice as general practitioners, but only those who mean to devote their attention principally to operative surgery.

333. Is the number of such considerable?—Very small.

334. Out of a given number, say one hundred, what proportion should you think would have performed those operations?—Probably, not above four or five, but I cannot say exactly.

335. Do you not consider it very desirable, that all the persons who receive certificates of qualification to practise either as surgeons or as general practitioners, should be perfectly capable of performing those operations?—Certainly; indispensable I think; almost all of them are required at times to perform those operations.

336. How many bodies in the course of a year, do you think essential to each dissecting pupil?—In the course of the education of the students they will vary; with moderate abilities, I should consider a student should dissect not less than one and a half, and perhaps another half would be sufficient for the performance of operations, so that two on an average would be what was required.

337. Do you mean two in the whole course, or two in a year?—Two in the whole course of their education, but as some of them stay two years in town, it comes to the same thing, that the number in a year would be the same as if each student performed his dissections in one year.

338. Do you include in that number, the number required for performing operations?—Yes, for the generality; not for those likely to be called upon to perform difficult

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difficult operations, such as the operative surgeons alone in general perform; they would require more, and in the present state of the times, they do take more.

339. You are stating the lowest number?—Yes.

340. Are not the dissecting schools also subject to very heavy expenses, in consequence of prosecutions instituted against the resurrection men, or in case of their being imprisoned?—Certainly.

341. The dissecting schools, in such cases, are required to make good all the expenses?—Some of them are; others remunerate men in prison, by coming forward as bail, or in other modes; but in some way or other, we are obliged to make compensation to them.

342. Do the resurrection men in general keep good faith with the professors at the dissecting schools, or do they after supplying them with bodies, inform against them as receivers?—Their faith is certainly very badly kept; their practice is occasionally to steal bodies, and then to inform against the professors in the manner mentioned, and against their brother resurrection men still more.

343. That is not an unfrequent circumstance, is it?—It is not.

344. That is for the purpose of extorting money, is it not?—It is.

345. This is one of the many inconveniences to which the professional men are subject from the present and only mode of obtaining subjects?—Yes, it is.

346. What is your opinion as to the effect which the giving up the bodies of murderers has upon the state of the public feeling?—It has the effect, by making the public consider dissection as part of the punishment for the crime of murder, of increasing their prejudices.

347. If the laws were so framed as to afford facility for the procurement of bodies, would not the general feeling of the medical body assist the operation of the law against those who continued the practice of exhumation, even though they could supply a little cheaper?—I think so certainly, because it would stand to reason that ultimately that must bring upon us again the same difficulties under which we now labour.

348. Do you think your object would be sooner attained by passing a law, permitting bodies generally to be given up, than by passing one compelling the surrender of any particular class of bodies?—Yes, I think so.

349. You have stated, that you consider the practice of giving up the bodies of murderers as likely to increase the dislike to dissection: do you consider that the practice of exhumation has that effect?—Certainly, I do.

350. Do you imagine, that by any new regulations to be adopted by hospitals and workhouses, such a supply of subjects might be obtained, as to get rid of the practice of exhumation?—I think with regard to the hospitals, we should take this into consideration; in the study of Anatomy there are two objects to be obtained; in the hospitals the students have the means of tracing the diseases to their termination, and making pathological observations for the improvement of their practice; the object in the dissecting schools is to obtain a knowledge of the healthy structure of the human body; and on that account, the number obtained from hospitals would be small in comparison with those which might be obtained from workhouses and gaols and other sources, not exclusively containing the sick.

351. Would not the consequence of obtaining a sufficient supply of bodies from the sources you have mentioned be, that the practice of exhumation would be discontinued?—If a sufficient number was obtained from other sources, that practice would be discontinued as unnecessary and revolting.

352. What part of the community do you think suffers most, from the discouragement given to anatomical studies by the defective state of the law?—Undoubtedly, the poor and the middling classes; the upper classes of society, generally employ men who have had better modes of education.

353. If the means of dissection were more extended, would there be fewer or more operations on the living body?—I should hope much fewer, in consequence of the additional information we should obtain as to the mode of curing diseases.

354. Is not the ignorant practitioner most likely to have recourse to violent and unnecessary modes of treatment?—A person who is ignorant of the mode of performing operations, will very often leave his patients to such a stage, that the operation would become useless; he would put it off to the last, instead of performing it at the proper time; though in some instances, surgeons would perform operations, where, if they were better informed, they would see that they were unnecessary.

355. Those who are the most interested in this are the public, and not the practitioners?—They are so, certainly.

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356. Is there any thing that you wish to add?—If you will allow me, I will make one or two observations on the obtaining bodies from gaols, or by importation from abroad: for the same reason, that it is not advisable that the bodies of murderers and suicides should be given up for dissection, I think the measure should not be compulsory on those in gaols, but that only the bodies of those who have no friends should be given; and with regard to obtaining bodies from abroad, I have frequently had them from that source; and in the generality of instances, they have been useless, from the time which has elapsed during their passage; and if any number were attempted to be imported, it is obviously the interest of the countries from which they are obtained, to put a stop to the practice, and that has been done in the only two countries from which it has been attempted; it is their interest to keep them in their own country for their own schools, and to prevent the exposure which takes place by the removal.

357. What are the two countries to which you allude?—France and Ireland.

358. The consequence of so small a portion of the bodies imported, coming in a fit state, is, that it renders those bodies as expensive as those obtained by exhumation?—In my own case it has so happened, and would in others very frequently.

359. Had any antiseptic process been adopted?—In some cases it had been, but not in all, as it rather tended to increase the chance of detection.

Herbert Mayo, Esq. called in; and Examined.

Herbert Mayo,
Esq.

360. YOU are surgeon to the Middlesex Hospital, and lecturer on Anatomy in Great Windmill-street?—I am.

261. Have you heard the evidence given by Mr. Green and Mr. Hawkins, and do you generally concur in their statements?—I have heard their evidence, and do quite concur in that which they have stated.

362. Do you agree with them, that three bodies in the course of two years for each pupil would be about the number sufficient?—I think that two would be sufficient, as Mr. Hawkins stated; Mr. Green estimated the number at three.

363. In this number of two, do you include the number necessary for teaching the operations that are afterwards to be performed on the living?—Yes, I do; from two to three at all events.

364. Do you concur in the opinion, that the giving up the bodies of murderers for dissection tends to aggravate the state of public feeling against dissection?—I have little doubt that that is the case.

365. Have you any data as to the number of subjects that might be obtained from the workhouses?—I have very few data that I have acquired myself; but from the Middlesex Hospital I happen to know that a small number may be obtained, and about an equal number from Saint Martin's parish; while from the general information I have received respecting other sources of the same description, I have no doubt the number that could be so obtained, would be much larger than would be required.

366. Have you any thing to state to the Committee as to the evils which the present difficulties of obtaining subjects give rise to, or any remedy to suggest as to the means of providing a supply?—I have nothing to add to that I have already heard suggested.

367. Is any considerable supply likely to be obtained from the sales of bodies by parties living, or from bequests of bodies?—From my own experience among the lower class of society, I am inclined to think there would not be any material supply from that source.

368. Is it the general wish of the profession to assist the magistrates in abolishing the practice of exhumation?—It is so, certainly.

369. You have resided at Leyden, as a student, have you not?—I resided at Leyden during two years as a student.

370. What information can you give to the Committee as to the mode of obtaining a supply of bodies for the dissecting schools there?—The dissecting school of Leyden was supplied directly from the civil hospitals, at Amsterdam; they appeared to be brought within eight-and-forty hours after the decease.

371. Was an ample supply procured?—A perfectly ample supply.

372. What was the number of pupils studying in the dissecting schools there?—To the best of my recollection, I should think about an hundred.

373. Do you remember what was the number of bodies that was supplied for the use

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use of those students?—I cannot state what the number of bodies employed was, but there was no stint at all to the supply; that I recollect perfectly.

374. Should you say that each pupil was supplied with two bodies?—I should think at that rate; probably more.

375. What course of education were the pupils required to go through, before they were qualified to practise in Holland either as surgeons or physicians?—I cannot give any exact information on that subject; I do not know the length of residence required of native students at the university.

376. Were the students there required to perform surgical operations upon the dead bodies?—They did perform operations on the dead bodies, but I am not aware whether it was required of them by the rules of the university.

377. Was it under the cognizance of government that this supply of bodies was obtained from Amsterdam?—I understood it to be so.

378. No other source of supply was necessary, that being ample?—It was ample.

379. Are you aware whether there was a similar feeling at Leyden respecting dissection, to that in England?—Apparently there was no prejudice at all; for in the principal towns in Holland there are lectures on dissection publicly, and dissected subjects are exhibited.

380. Was there a hospital at Leyden?—There was a military hospital, from which no bodies were obtained; the general hospital at Leyden was very inconsiderable; there were not above thirty patients, and I never heard of a supply being obtained from that.

381. Do the public generally attend the lectures on Anatomy in Holland?—The public generally attend.

382. Is the process of dissection carried into effect as thoroughly at Leyden as it is in our schools?—Quite so.

383. Were the bodies buried, and any funeral rites performed after inspection or dissection?—Subsequently to their arrival at Leyden nothing further was done with the body; no religious ceremony was observed.

384. You say you have not found any prejudice existing on the subject of dissection in Holland; do you know whether there is any law in Holland that affixes dissection as part of the penalty on crime?—I am inclined to think, having no exact information on the subject, that is not the case; I recollect while I resided at the Hague, two persons were executed for murder, and I am quite satisfied I should have been acquainted with the fact, if they had been given up for dissection, as I was acquainted with the medical men.

385. Did you ever hear of the practice of exhumation taking place in Holland?—Never.

386. You believe it not to have taken place there?—I believe it not to have taken place there; I should most probably have heard of it if it had.

387. To what should you attribute the state of the public feeling which exists in England?—I suppose it must greatly depend on dissection being made a part of the punishment for murder, and likewise owing to the mode in which the bodies are procured by us in this country, namely, by exhumation; I never observed any feeling expressed among the poor in reference to examination or dissection in their own case; I do not therefore believe that the anticipation of dissection (in case no friends came forward to claim their bodies for burial) would be a source of distress or apprehension to patients dangerously ill in work-houses, parochial infirmaries, and the like; the argument to which I have adverted, is probably the only argument against a law permitting or enjoining the directors of parochial establishments to give over the bodies of those who die, unclaimed by friends, for dissection; it should be borne in mind, that surgeons must begin to practice on the poor, as the rich employ those only who are known to have already practised their art successfully; it is, therefore, for the interest of the *poor* especially, that surgeons and practitioners of every kind, before they commence practising, should be well educated.

James Paterson, M. D. called in; and Examined.

388. THE Committee understanding that you wish to state to them your opinion as to the possibility of obtaining an ample supply of subjects for dissection by means of importation, request you now to make that statement?—The circumstance of my turning my attention to that subject arose from my having the honor to belong to the vestry of St. George's Hanover-square; several gentlemen, particularly Lord Calthorpe, begged me to turn my attention

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to the subject, to the best remedy for the difficulty; it was of course a delicate and, in his opinion, a very difficult subject; when I saw his lordship two days after, I reported to him that in my opinion, if the thing was cautiously and prudently conducted, a very ample supply of bodies for anatomical purposes might be obtained from foreign parts, including Ireland, provided every obstruction to the admission of them from the custom-house, and every other source that could obstruct their arriving in safety to the anatomists and surgeons, were carefully removed; I found that opinion on the circumstance of having passed a long life in the West of Scotland, opposite to the coast of Ireland. It is no less than fifty years since I first began to study medicine, and until I retired from practice, I was in full practice in the county of Ayr; during the whole of that period I was constantly asked by the parents and relatives of young men intended for the medical and surgical profession, to assist them with my advice to direct their studies, and my attention was called to the procuring them subjects for dissection, which I look upon as essential to the qualifying them for their profession; I found in that situation that I had very little difficulty, except that which arose from the custom-houses, and that, I frankly own, I evaded by smuggling; the facility of intercourse was so great, that in a few hours a dead body might be procured by means of the vessels which carry over lime-stone; the dead body was concealed, and put into a boat and landed on the coast; I never found any material difficulty; I also learned that the Universities, both at Glasgow and at Edinburgh, were supplied in the same manner by running up the Clyde or landing them at Fairlie; but I durst not let it be known to the custom-house officers; for there was a duty *ad valorem*, which appeared to me to be a downright despotic tax, imposed according to the will of the custom-house officer; but a still greater obstacle was the antipathy of the custom-house officers to inspect subjects, in consequence of which, the moment they discovered one of them, they ordered it to be buried, instead of forwarding it to its destination. Those circumstances of course led to their being landed privately on the coast of Scotland; but I really found there would have been a very ample supply at a very moderate price; indeed if there were no obstacles of that kind interposed, the difference of price was so great, it was quite obvious on the ordinary commercial rules, they must be to be had; people used to come to me, when they understood I wanted a subject for a young man prosecuting his studies; a sailor would come to me on the evening, walking about, and say, do you wish to have a *stiffin*, I will provide you; the word I presume is a stiff one; and on my saying yes, what terms do you ask, we made the bargain.

389. How did you understand that those bodies were obtained, by exhumation or otherwise?—I understood that a great many were obtained without exhumation.

390. Are you aware of the difficulties which attend the importation of bodies into London?—I am coming to that; two years ago I made a tour into France, and I spent some time in Paris; I there met with a number of young gentlemen studying medicine, natives of Scotland, whose relations I had formerly attended as their physician; I naturally had a good deal of conversation with them about their studies, and among other things, about the mode of obtaining subjects. I learnt from them that subjects might be procured in very considerable quantities, both from Paris and from the hospital of Rouen, by running them over to the coast of England; that the great difficulty was in the custom-house, in the manner I have already stated; in the first place the *ad valorem* duty, and next the anxious disposition of the custom-house officers to commit to the earth any dead body, especially if it was in the least tainted; I enquired about the prices, and I understood that in Paris a subject could be procured for fifteen or sixteen shillings, consequently the high price in England would insure an ample supply, if no difficulty was interposed on one side or the other; I was informed there was no difficulty on the French side of the channel; I was informed that they might be forwarded to this country at a reasonable rate, and that by the use of chlorine they could be kept in a proper state for inspection.

391. Have you any particular mode of preparing bodies to last for a considerable time?—I have no mode but that which is well known, the use of the bleaching powder, which is the chloride of lime; that is quite sufficient.

392. You had a supply from Ireland you say for a considerable time; are you aware of any particular prejudice on the part of the Irish against the supply of the dead bodies of their relatives?—I understood there was a great horror at violating of tombs in Ireland, but that there was a considerable facility of procuring subjects without that; that many of the poor people in Ireland, after having waked a body,

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which they look on as a very important matter, for a very moderate sum indeed would part with it.—I have brought with me a paper I copied from the books of the parish I live in, St. George's Hanover-square; I have attended a good deal to the sick and poor in that parish for the last two years, as a vestryman and as belonging to the poor board in that workhouse; for the last ten years I have an account of those buried at the expense of their friends, and those buried at the expense of the parish; I had not time to make inquiries through the whole ten years, but I made all the inquiry I could in regard to those who died during the last year; they amount to one hundred and seventy-seven; I found that of those who died within the last year and were buried at the expense of the parish, twenty-five were unclaimed by any relations, and that of about fourteen of those there was no tracing of any connection whatever. Poor people wish to avoid the expense of the funeral, and therefore they do not apply till some time after the funeral has taken place at the expense of the parish; they then generally apply for their clothes, so that it is difficult to know exactly when an application may be made; an application has been made nine months after a funeral; but this paper contains a correct statement of the whole of the deaths in that workhouse for the last ten years.

[The Paper was given in.—See Appendix, N° 24.]

Richard Dugard Grainger, Esq. called in; and Examined.

R. D. Grainger.
Esq.

393. YOU are teacher of Anatomy in the school of Webb-street, in the Borough?—I am.

394. You have heard the statements made by preceding witnesses this day as to the difficulty of obtaining subjects, and their suggestions as to a better mode of obtaining a supply: do you concur with them in their statements and suggestions; and if not, will you state in what you differ from them?—I should think there could be no difference of opinion, that of the several sources mentioned, the great source we ought to depend on, is the unclaimed bodies in this country; I think nothing can be expected permanently from importation from Ireland or from France. The difficulties which at present exist, frequently stop the whole dissections of a class for a month, or five or six weeks.

395. It is not then merely on account of the expense that the present system may be objected to, but that very often, whatever price be paid, a supply of subjects cannot be obtained?—It is quite insufficient.

396. Have you had occasion frequently to have intercourse with the persons commonly called resurrection men?—I have.

397. What is your opinion as to their character?—They are certainly the very worst part of society; they have very frequently been noted thieves, felons and so forth.

398. What is your opinion as to the number of subjects that are absolutely necessary for a dissecting pupil in the course of a year?—I think not less than two for each student in the year.

399. How many in the whole course of his instruction?—If it is confined, as it is at present, to two winters, three; but my opinion is that there is a great defect in medical education, in so short a time being allowed for the study of Anatomy, when five or six years are devoted to learning dispensing behind the counter, which might be learnt in two years, whilst only two winters are allowed for all the important knowledge to be obtained in the schools.

400. When you speak of three as a proper supply, do you include in that number the subjects necessary for the pupil to operate upon, in order that he may make himself master of the operations on the living body?—I do.

401. Have you actually imported bodies for the purpose of dissection?—I have, from Ireland.

402. Will you state whether the bodies arrived in a state of freshness, fit for dissection?—Very few.

403. What are the difficulties which present themselves in reckoning upon importation from Ireland as a source of supply?—First of all there are the obstacles thrown into the way of conveying bodies to any place by officers and all other persons, who will stop them if they possibly can; and whatever be the state of the law, I conceive the great distance, and the uncertain communication between Dublin and London, must render it extremely doubtful whether the bodies can be brought to this country at all fit for dissection.

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404. Can an adequate supply be obtained in Ireland?—I should doubt that very much.

405. Is it not the interest of the teachers in Dublin, by reason of the great resort to their schools of students in Anatomy, to secure to themselves exclusively the supply which hitherto has been found so abundant?—Undoubtedly; to my own knowledge that is the case; I know that the professors in Dublin would stop it at once, the moment they discovered it; whatever bodies have been sent from Dublin, have been obtained without their knowledge.

406. Are any difficulties interposed by the masters of vessels, if they discover the nature of what the package contains?—I have certainly found that they would not take any package, if they suspected that it contained a dead body.

407. If a supply could be obtained from this channel, by what course would the bodies be sent to London?—The most certain way is that by Holyhead, for that is the shortest sea passage, and certainly in the winter it is very important that the distance by water should be as short as possible; they can be sent by Liverpool to London, but the greater distance by water makes that method more uncertain.

408. Have the custom-house ever interposed any difficulties?—I have not known of any impediment at the custom-house, but on the road the packages have been suspected and detained.

409. Have the police ever interposed any difficulties?—I have not known any instances.

410. Have any bodies which you have endeavoured to obtain in that way, been discovered?—Several on the road have been discovered, and very few which have arrived, have been fit for dissection.

411. Have those which you have received, been sent by way of Holyhead?—Yes.

412. Are not the teachers in private schools greater sufferers from the difficulties that occur in obtaining bodies, than the professors at the public schools attached to the larger hospitals?—As far as the supply is derived from the resurrection men, I should think they are nearly on an equality; there are certain means of obtaining bodies in the hospitals at present, by which of course the hospital schools have the advantage.

413. The question does not refer merely to the advantage which the supply from the hospital may afford; a private teacher of course, if he can afford to pay the same price to the exhumator as the hospital teacher, will have the same facilities for obtaining bodies; but if the teacher at one of the hospital schools has the free use, without rent, of the theatre and dissecting room, and also shares in the fees of the students attending the hospital wards, will he not be better enabled to incur a loss upon every subject that he purchases at a high price and sells again at a moderate one to his dissecting pupils, than the teacher in a private school not possessed of such advantages?—Undoubtedly.

414. Therefore the teachers in the private schools are those who suffer most in consequence of the difficulty of obtaining supplies?—I conceive so.

415. Is it not the case that many teachers of private schools have been obliged to retire and give up their teaching, in consequence of this difficulty?—Several have, and I conceive it most probable that this difficulty may have been the most influential cause; I am not aware of any certain fact, but I conceive that this has been the principal cause.

416. Have not the teachers, in the schools attached to the hospitals, the dissecting rooms and the whole dissecting establishment found for them at the expense of the hospital?—The whole of the buildings, I believe, in every hospital; but I cannot speak with certainty on that point; Sir Astley Cooper and Mr. Cline contributed to the erection of the buildings, I believe, five hundred or a thousand pounds each.

417. Are you aware of the way in which the bodies you procure from Ireland are obtained?—They have not been buried, they come from the hospitals and some of the larger establishments there, and certainly they have not been interred.

418. The general wish of the medical men is to get rid of the practice of exhumation?—Undoubtedly.

419. Do you not think that by giving greater facilities to the voluntary appropriation of bodies to the purpose of dissection, effect will be given to the same degree to the law for the protection of the grave?—Certainly; I doubt very much, in the present state of public feeling, whether any voluntary power would produce a sufficient supply; I think there must be something compulsory as to those persons who die without friends.

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420. Do you think that the abolition of the law which gives up the body of a murderer to the anatomical schools, would tend to mitigate that feeling which exists among the different classes of society against the bodies of their friends and relatives being dissected?—I think that would operate most powerfully.

421. You state that there has been a frequent interruption in the course of your lectures from the want of bodies?—Not in the lectures, but in the course of dissection.

422. Is not that very prejudicial to the course of science?—Undoubtedly; it generally takes place at the beginning of the season, which is the most valuable time, because the pupils are then most inclined to attend; if they remain idle for six weeks or two months, or a longer period, the taste may then have passed off, and this idleness may have been injurious to them by producing bad habits.

423. You have stated that bodies imported frequently arrive in too putrid a state for dissection; is there not any antiseptic process which would protect the bodies against that degree of putrefaction?—There are several modes; but those which I have seen tried, will preserve the body; but they alter it so considerably, that it loses its value for giving a knowledge of the healthy structure of the different parts.

424. Would the antiseptic process preserve the viscera as well as the trunk?—Certainly not some of the viscera.

425. What is the price you now pay for a body?—On an average at least eight guineas and a half.

426. How high do you remember it to have been?—Some subjects have cost me as much as twelve sovereigns, or more; for one resurrection-man alone I incurred an expense of 50*l.* in consequence of allowing him a certain sum per week for two years while he was in prison; during the present season I have expended several guineas in supporting another man's family while he was in prison; these expenses fall, not on the pupils, but on the lecturers; for if bodies are to be obtained, we must promise to take care of these men when they are in trouble.

427. Would the anatomical professors in general concur in an undertaking to give decent christian burial with funeral rites, to the remains of those on whom they had operated?—Most undoubtedly.

428. Is there any further statement you wish to make on this subject?—As to the importation from any foreign country, there is no doubt if it was made a public affair between the two countries, the government of France would, in my opinion, immediately stop it; in addition to which, in the case of war, all supply must of course be stopped; and I believe the supply during peace could never be carried on with certainty.

429. You have stated that you do not think a law, simply permitting persons to give up the bodies that are unclaimed, would be sufficient to afford an adequate supply of subjects to the dissecting schools; do you not think it would be imprudent in the first instance to introduce a compulsory law, until the public mind became reconciled to that mode of obtaining a supply?—I think it is extremely important that the feelings of the public should not be outraged; and as the impression is against Anatomy, it would be necessary to be prudent; but I am afraid if exhumation is stopped, that for some time at least, unless a compulsory law were passed, the schools in London would be entirely stopped.

James Somerville, M. D. called in; and Examined.

430. YOU are assistant to Mr. Brodie at the School of Anatomy in Windmill-street?—I am.

J. Somerville, M. D.

431. You have heard the evidence of the previous witnesses as to the difficulties of obtaining subjects, and their suggestions for procuring a supply in future; would you wish to make any observations upon what those witnesses have stated?—I wish to observe, that the prejudice created by giving up murderers is infinitely stronger, according to my own experience, than has been stated by any witness. Within a short time, the dissecting room where I am at present, has had the body of a murderer; during the whole course of the last six or seven years that I have been connected with that school, I have never seen, on any occasion, the least disposition on the part of the people to interfere or to take notice of that dissecting room; so that the bodies are received there even by day, because there has been no suspicion entertained; but since this woman has been received, a sensation has been excited in the neighbourhood; I have been annoyed by the number of persons asking permission to go in for the purpose of seeing the body of a person they

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they thought a *victim*, and the annoyance would be quite sufficient to deter me, were the school my own, from admitting a body under similar circumstances.

432. Does very great difficulty occur in obtaining the necessary supply of bodies at present?—The difficulties are of that magnitude, that I have known the school stopped for six or seven weeks, because bodies could not be obtained at any price.

433. What is the effect on the pupils?—The resurrection men are fully aware, that when the pupils first come to town, they are very anxious to proceed with their dissection; accordingly they create difficulties, in order to enhance the price; and the pupils, not being able to proceed for a certain time, lose their ardour and get into habits of idleness; dissection towards the middle and end of the season, owing to loss of zeal from disappointment and consequent idle habits, is not so agreeable to them as it would be at the commencement.

434. What can you state as to the conduct of the resurrection men, or the gangs into which they are divided?—When bodies were easily procured, there were very few men employed as principals, *leaders* as they were called. The quarrels which have since taken place, have split them into many gangs, and those gangs reside exactly in those neighbourhoods where riot and housebreaking are carried on to the greatest extent.

435. What is your opinion as to the character and conduct of the resurrection men?—That they are in the lowest grade in the community, thieves, pickpockets; and the better class are receivers of stolen goods; and there are probably not more than four out of sixty of those men, who subsist by raising bodies; the remainder, I believe, exist by stealing.

436. Do not the leaders of the resurrection men generally keep a horse and cart, which at times, when not employed in obtaining bodies, are put to other uses?—They must in their avocation keep a horse and cart, that is on the pretence of their being resurrection men, while, in fact, it is often for the purpose of housebreaking.

437. Is not the pretence of carrying about bodies, which the police may possibly be less anxious to notice than other infractions of the law, very often made the cover for transporting stolen goods?—Several instances of that nature are well known to the police.

438. What is your opinion as to the possibility of obtaining a supply of bodies by sale or bequest?—That would be found entirely among the lower order of Irish, who I believe conceive that their duties to the dead are discharged, when the *wake* is over.

439. Have you ever met with any instances of that?—Yes; a woman lately claimed a child in a workhouse, and after having kept it for three or four days and waked it, she threw the dead body into the workhouse; another instance occurred, where the parish authorities, knowing the mischief which followed a wake, resolved not to give up the body of a person, because the relationship was too remote to entitle them to it; the Irish went away dissatisfied; on the day of the interment they attacked the funeral procession, carried off the corpse and kept it for three days, waked it, and on the fourth day they put it into a sack and threw it into the workhouse.

440. This occurred in London?—Yes, in the parish of St. Andrew's, Holborn.

441. Are the surgeons in the habit of purchasing any bodies, either of the parties themselves before death, or of the relatives of persons deceased?—They cannot, according to the present state of the law.

442. Putting the law aside, are they in the practice of advancing money on such conditions?—They are not.

443. Can you speak as to the obtaining of bodies by importation?—I can.

444. In what state do the bodies so obtained arrive?—The Secretary of State gave permission to the custom-house to allow bodies to be imported, and one of the conditions with the custom-house was, that I should personally superintend it, in order to prevent the privilege from being converted into a means of smuggling; accordingly, when a vessel arrived, having packages with certain marks, they were claimed by me, and delivered on my responsibility. Every facility was afforded by the Secretary of State and the custom-house officers, yet the experiment, though tried very extensively, was a complete failure.

445. From whence were the bodies which you speak of, imported?—From Dublin and Paris.

446. Have any difficulties arisen, or are any difficulties likely to arise in future, in obtaining a supply from those quarters?—As to Paris, it must be at all times very difficult, since there is a positive law against exporting dead bodies.

447. Do you know of there being a law against exporting bodies, as such, in France?—From

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—From having made particular inquiries on the subject, I am satisfied there is a law; and in order to surmount the difficulties arising from it, it was necessary to export them as mummies, having them prepared for the purpose; they were then sealed in Paris, to prevent their being opened at Calais; but on their arrival in this country, we generally found them in such a putrid condition that they could rarely be used. We could not hope to continue this experiment without a discovery being made on board the steam-boat, or on the other side, in which case punishment would follow.

448. Was the police in Paris cognizant of their being bodies?—Not at all.

449. What difficulties did you meet with on the part of the owners of the vessels?—We met with no difficulty, so far as the passage from Calais to London was concerned; but in the experiment of Dublin, the captains of the steam-boats told us, that a fine of 50 *l.* would be levied for every dead body found on board their vessels.

450. What was the conduct of the police, on the arrival of the bodies in London?—I believe the police, having had information (by whom given we have not found out), that some bodies were on board the steam-boat, sent orders to seize those bodies, and to arrest the person who came to claim them.

451. Did you understand that such arrest, if carried into effect, would have been legal?—I understood so, as I immediately went to the Home Office, and told the circumstances, in order to extricate myself; as some of the police men told the sailors they had orders to seize me, but to let me first take possession of the goods.

452. Did the Home Office remove all the difficulties?—Immediately.

453. What was the feeling of the porters and those employed on the wharf, on the discovery that those were dead bodies?—I must say, in the first place, no bodies can be brought any distance without a suspicion being raised on the part of the sailors, who knowing there were bodies on board, kept the secret; on its being discovered by the police men, who consequently went on board, the sailors, observing me going from Greenwich to the steam-boat, sent immediately to give me warning, and prevent me from running the risk; they told me that they had done every thing they could to get the thing hushed up. A body was lately seized at the custom-house in London, at the Galley Quay, it was exposed to the gaze of at least two or three hundred persons, but not one of the men interposed the slightest difficulty to its removal; but when I presented myself, and told them it was a body which had died of a curious disease, and came here to be examined, they all offered to hire themselves as porters to carry it home for me.

454. What is your opinion as to the possibility of obtaining bodies in a state fit for dissection, in case they are prepared by an antiseptic process?—That from the length of the voyage, little benefit would result from that process.

455. Does any thing occur to you as to the mode of obtaining a supply of bodies from workhouses?—I have made inquiry at several, but more especially at the workhouse of the parish of St. James, and find the number who died in it, between the 1st of January and the 31st December 1827, was 171 persons, of which number the parish buried 138, and the friends 33. The number of persons dying out of the workhouse, but brought in to be buried by the parish, was 44. In the parish of St. Clement Danes, the total number buried by the parish is 90. In the parish of St. Andrew Holborn and St. George the Martyr, the total number buried by the parish was 66, and claimed by the friends 24. I believe there can be no doubt that there is an ample supply of dead bodies to be had in the manner suggested.

456. Is it your opinion, that any measure for altering the law should be permissive in the first instance, or would you have it compulsory?—I believe a permissive law would answer all the purposes desired.

457. Do you think it would be advantageous to pass a law against exhumation, making the penalties more severe, if the other were merely permissive?—Exhumation would cease, if other modes were found of supplying the schools.

458. It is the general wish to abolish the practice of exhumation?—Most undoubtedly.

459. And to give no encouragement, directly or indirectly, to it?—No; if the public were aware of the horrors resulting from exhumation, that would of itself remove the prejudice, and induce the legislature to substitute a mode of accomplishing so important an object as we have in view, less repugnant to decency.

460. What is your opinion as to the number of bodies that on the average are required for each student entering a dissecting room?—In my opinion, each student of anatomy ought to have two bodies in the course of a season.

461. How many seasons ought he to continue under study?—I conceive the present system of medical education defective in England, in the allotment of time to the

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different branches: a student is required to have served an apprenticeship of five years to a general practitioner, before he becomes qualified for examination as apothecary; much too great a portion of this time is employed in pharmacy, while general education is much neglected, and the time devoted to the study of anatomy and the acquisition of professional knowledge is too short; the pupils have this further disadvantage, of commencing their studies at a later period of life than in any other country.

462. How many courses of dissection do you think a student, in the whole career of his education, ought to go through?—I think four or five seasons, varying according to aptitude and diligence in the student.

463. How many bodies in the whole do you think each pupil ought to have dissected, before he is permitted to practise?—If a student studies for four years, and has had six bodies, he will have had ample opportunity for qualifying himself in his profession.

464. Do you include in this number those bodies upon which he would have to perform the leading operations in surgery?—Yes.

465. You would concur in the propriety of the directors of anatomical schools being obliged to give decent funeral rites to the remains of the bodies which have been subjected to their observations?—Most decidedly.

466. You stated that a great crowd of people came into the dissecting room, in which the body of a murderer was deposited; was it curiosity that brought them?—Idle curiosity, and a desire for seeing dead persons under those circumstances, prompted many, no doubt, to inquire; but the injurious effect that it produced was, that the great proportion of the persons hanged are of the lower orders of Irish, and they have as great a veneration for persons executed as if they were innocent, and as great anxiety to have them waked; and consequently a most awful feeling against dissecting rooms.

467. You think this feeling peculiarly attaches to the Irish?—To the Irish more particularly.

468. Do you conceive that the circumstance of witnessing a dissection created a prejudice against it?—I believe not.

469. You do not think that their minds were affected by what they saw of the dissecting room?—I believe not; I believe, if the public were more frequently allowed to see dissecting rooms, the prejudice would diminish; because in France the rooms are open to the public, and I never saw any inconvenience from it.

470. Does the objection to the bringing of the body of a murderer into the dissecting room apply also to bringing in the body of a suicide?—Most distinctly, since it is a violence done to the feelings of the innocent relatives.

471. You have studied for a long period in Scotland and Paris?—I have.

472. How long in Paris?—In Paris twelve months.

473. What is the method by which the dissecting schools at Paris are supplied with subjects?—They are supplied from the hospitals and institutions for maintaining paupers.

474. All the public hospitals and all the institutions resembling our workhouses, such as the Salpetriere and Bicêtre, give up the dead bodies of those who are not claimed within twenty-four hours to the dissecting schools?—They do; I believe the French have no very great objection to dissecting rooms, and there is very little inquiry made about the dead.

475. Do you know, when parties die, whether the relatives are informed of their death, or whether a list of the deaths is suspended in the hospital for the information of relatives?—They do not give themselves any trouble to find out relatives.

476. Then if, after the expiration of the twenty-four hours, the relative applies, what is the answer given to him?—That the bodies are interred.

477. Is an ample supply for the use of the dissecting rooms thus obtained?—There has not been, so far as I know, any difficulty till within the last few months, when there has been, I understand, a little scarcity.

478. Do you know what is the total supply obtained in Paris?—I am not aware of the actual number.

479. Do you know whether the proportion of bodies given up for dissection is large compared to the number who die in the hospital?—I know it is a very large proportion.

480. Is the supply of the bodies from those different hospitals to the dissecting schools under the superintendence and management of any public officer?—I believe the *chef des travaux anatomiques*.

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481. How many dissecting schools are there in Paris?—Two great public schools; *J. Somerville, M. D.*
L'Ecole de Médecine and La Pitié.

482. In what manner are the bodies transported from the hospitals?—I have seen carts employed, even in the day time, to collect bodies.

483. When they arrive at the schools, under what limitations is the dissecting conducted?—There are superintendents appointed, who are answerable for an equal distribution of the bodies, and these superintendents are under the control of the *chef des travaux anatomiques*.

484. When the bodies arrive at the school, who are the persons that distribute the bodies?—There is a head, the *chef des travaux*.

485. Are there any assistants?—He has several aids under him.

486. Of whom do those aids principally consist; are they all natives of France, or are some of them natives of other countries?—I believe there is no distinction made; that it is by merit, that they are the most talented of the students, that the office is open to all.

487. Are the bodies delivered to the use of the dissecting students at a certain price in the dissecting schools?—They are, I believe, nearly at the same price at all times; eight francs was the common price at the Ecole de Médecine.

488. Is there not a difference in price according to the condition of the body, whether it has been opened or not?—Yes.

489. What is the price of a body which has been opened?—I cannot say; I never had one which had been opened; those which have not been opened are always preferred; entire bodies indeed are never wanting.

490. Is there any difference of price according to its having been injected or not?—Yes, there is a difference.

491. What is the highest price in the dissecting schools?—I never heard of more than sixteen francs; I have known sixteen francs given for a particular body.

492. On the average, what is the price?—From eight to ten francs.

493. Are the bodies, either before or after examination, buried?—After examination, it is demanded that they shall be decently interred.

494. Are you aware whether the bodies of any criminals in France are given up for dissection?—Most assuredly, none. Those executed are, by the Code Napoleon, ordered to be delivered to relatives, but to be privately buried; if unclaimed, they are like others in the same predicament.

495. You do not believe that any bodies whatever in Paris are obtained in any other manner than from the hospitals?—I am certain there are not.

496. Do you understand that the practice of exhumation is a crime that is punishable by the French law?—It is considered a very heinous offence, and unheard of for anatomical purposes.

497. Do you know that it is punishable under the Article 360 of the penal code?—Yes, there is such a law.

[*The Article was read as follows:*]

“Sera puni d'un emprisonnement de trois mois à un an et de seize francs à deux cents francs d'amende, quiconque se sera rendu coupable de violation de tombeaux ou de sépultures, sans préjudice des peines contre les crimes ou les délits qui seraient joints à celui-ci.”

498. There is scarcely any limitation to the number of bodies a pupil is allowed to dissect, if he be industrious?—Certainly not.

499. A pupil who enters himself there for dissection, dissects, if he pleases, without any immediate interference on the part of the aids, or of the general superintendent of the establishment?—Certainly.

500. Is there any thing further you wish to state as to the mode of obtaining a supply of bodies at Paris, or the manner in which the pupils conduct their operations?—I believe that the reason why in France there is no prejudice against dissection is, that relatives or friends seldom have their feelings injured by any person being taken forcibly from them; and I firmly believe that if a supply could be obtained by the same means in this country, the prejudices would rapidly subside. But, independently of the other sources, the workhouses and prisons, there are various other institutions which might furnish bodies, and which come under exactly the same rules.

501. Do you think the English schools of Anatomy are subject to greater impediments than any with which you are acquainted or that have heard of, in foreign countries?—Most decidedly.

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502. You

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502. You have stated that you have heard or known that lately there has been some difficulty in Paris in procuring subjects for dissection; to what do you conceive that difficulty is owing?—The priests in France have always beheld with great jealousy the progress made by medical students; the priests are rather anxious to check the study of medicine, or to lower it.

503. In what way did they interfere?—Formerly they did not make it a religious question at all; but as they had determined to put down the school of medicine, they gave themselves a great deal of trouble in finding out the relatives and friends, and saying mass very cheap.

504. Did they endeavour to give the relatives notice where the deaths took place?—Yes, they found out the relatives, and caused them to claim the bodies.

505. Does not dissection by the English pupils in Paris generally take place under the superintendence of English surgeons?—It formerly did so, but a gentleman who is attending can best give information why that was discontinued.

506. Can you state any other sources from which a supply might be derived?—In the Grampus hospital-ship there are a hundred foreign seamen who die, I understand, without any friends; this is only one of the many sources which will come to the knowledge of the Committee when they come to inquire; there are also many charitable institutions and penitentiaries about town, and a great many other places where bodies might be had.

James Richard Bennett, Esq. called in; and Examined.

J. R. Bennett, Esq.

507. YOU are lecturer on Anatomy and part-proprietor of the school in Little Dean-street, Soho?—I am.

508. The Committee understand that you have studied in Dublin, and that afterwards you had under your care for a long period in Paris, a considerable number of English students, resorting thither for the purpose of obtaining a knowledge of Anatomy?—Yes, I had.

509. State, as far as you are able, the sources from which the dead bodies are obtained in Paris for dissection?—It may not be unnecessary to premise, that prior to the revolution in France the different hospitals in Paris were supported, as in London, by voluntary contributions, and private and distinct funds, each having its separate government. At the period of the Revolution all were connected together, and their several funds being consolidated, and further revenues being provided by the government, the management of all the hospitals in Paris was entrusted to a body entitled the “Administration des Hopitaux,” which is now composed of the leading noblemen and other distinguished persons in Paris. The Administration des Hopitaux have always felt it their duty, for humanity’s sake, to promote the cultivation of medical science, and with that view to give up for anatomical purposes the unclaimed bodies of those who die in hospitals. They thus carry into effect the law passed by the legislative assembly, whereby it was enacted that the bodies of all those persons who died in hospitals, which should be unclaimed within twenty-four hours after death, should be delivered up for the purposes of science. Exhumation was thereby rendered unnecessary, and severe laws were directed against the practice, which at present is never resorted to in Paris. I believe it is calculated that about one-third of those who die at Paris, die in hospitals, which are consequently very numerous, and it is supposed that about one-fourth of the number who die in hospitals are not claimed by their friends; at least, in 1822, when I went to Paris, that was the case; but before I left Paris the subjects became scarce, in consequence of the interference of the priests.

510. Can you enumerate the different hospitals in Paris, from which the supply is derived?—The Hotel Dieu, la Charité, St. Louis, Necker, Enfants Malades, la Pitié, and Beaujon, are the principal hospitals, besides the two great houses of refuge, viz. the Hospices Salpetriere and Bicêtre.

511. What is the mode in which the bodies of those who die, are transferred to the dissecting rooms?—They are sewed up in a clean cloth, and being placed in a covered cart, are in that manner brought to one or the other of the great dissecting establishments; there are but two dissecting establishments in Paris tolerated or permitted by the police, the Ecole de Médecine, and the Amphithéâtre, adjoining the Hôpital de la Pitié.

512. Is there no dissecting room, attached to any of those hospitals in particular, at which dissection takes place?—It is forbidden; the physicians or surgeons have a right by law to open, for the purpose of inquiring into the nature of the disease, the

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the bodies of those persons who die under their care in the hospitals, whether those bodies be claimed or not; and the examination is made in the dead-room of the hospital; but the process of dissecting by pupils, is forbidden in the hospitals, though carried on to a slight degree privately.

513. Is the manner in which the bodies are treated after death and conveyed to the different dissecting schools, conducted with perfect decency?—Perfectly so; a person dying is attended by the pastor or priest; after death, certain religious ceremonies are performed by the priest connected with the hospital, and after that the body remains until the expiration of twenty-four hours in the hospital.

514. In any room?—There is a dead-room into which they are removed from the chapel or altar; at the expiration of twenty-four hours, if the friends do not claim the body, it is then enveloped in clothing, and conveyed in a covered cart to one or other of the great dissecting establishments.

515. At what hour?—The rule is, that the covered cart only pass at night, but occasionally the bodies were brought during the day time.

516. Do you know what is the number of pupils in Anatomy, of all nations, attending the dissecting schools at Paris?—I cannot state precisely; but I should suppose that at the period when I first went to Paris, there were from five to six hundred pupils attending the anatomical schools; they have increased of late very much, particularly by the influx of English students.

517. How many English were under your care when you first went to Paris?—During the first year, 1822–3, I taught Anatomy in Paris, I had only eighteen English pupils; during the second, I had forty-two pupils altogether; in the middle of the third year, I was obliged by the French authorities to discontinue.

518. To which of the two schools were you attached?—The amphithéâtre, adjoining the Hopital de la Pitié.

519. In what capacity were you in that school?—I had no office nor authority from the French government; I merely taught there under sufferance, every person having a right to dissect there; but there were certain parts of the establishment which at that period were hired out for private dissection, and those rooms were held by the English students, to whom I lectured on Anatomy.

520. Is an ample supply of bodies obtained from those sources for the use of the pupils dissecting?—Very ample indeed; more than sufficient.

521. At what price are the bodies charged to the pupils?—If a body was opened and examined in the hospital, the charge was only three francs; if the body was not opened, it was five francs; and if the body was injected, it was twelve francs; I perceive by the document before me that these charges varied a little at different times.

522. In fact you were rather tolerated at the dissecting establishments than to be considered as forming an officer or part of the establishment?—Just so.

523. Are these—[*A paper being shewn to the Witness*—nearly the regulations on which the dissection goes on at the amphitheatre?—Yes, they are; I have read them, and with one or two very slight exceptions, they are the regulations which existed during the period I taught there.

524. You have stated that there has been some difficulty in Paris in procuring bodies; may not that difficulty be accounted for by the increase of pupils and the exportation of bodies?—The increase of pupils may to a slight degree; with regard to exportation, the number of bodies which has been brought from Paris, has been, I understand, very limited; and I believe the impediments are such as to do away altogether with the possibility of obtaining any considerable supply; the exportation of bodies therefore could not have rendered them scarce in Paris.

525. Did you practise in Paris?—I did not practice, having confined myself to teaching Anatomy.

526. Are you at all aware whether the feelings of the upper classes of society in France are more opposed than in this country, or as much opposed to the practice of subjecting the bodies of their friends to examination?—There is much less dislike, I believe, to dissection in that country than in this, amongst all classes of society.

527. Did you not yourself latterly meet with some difficulties in superintending the English students, of whom you had the care?—I experienced much difficulty from those individuals who had the right of teaching at the amphithéâtre de la Pitié, they conceiving, I presume, that I interfered with their interests; I consequently applied to Sir Charles Stuart, then British Ambassador at the French court, and prayed his interference with the French government for their permission of an authorized English school in Paris; Sir Charles Stuart did not feel himself at liberty to make the

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request

Appendix,
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request without the sanction of the English government; I therefore came home and addressed Mr. Canning, then Secretary for Foreign Affairs, and was led to expect his concurrence; but on the subject being made known to the College of Surgeons in London, they waited on Mr. Canning and dissuaded him from granting my request; sometime after my return to Paris, the French authorities obliged me to desist from teaching.

528. Was the jealousy in Paris occasioned by the number of subjects dissected by your class being so large as to occasion some little difficulty in the remainder of the students obtaining the number they wanted for dissection?—It was the ostensible objection.

529. The French students behaved with some little degree of violence on the occasion, did they not?—Yes.

530. That was an inconvenience to the danger of which the English, resorting to the French school for dissection, must always be more or less liable?—Decidedly so.

531. Are you aware of the fact that no bodies of criminals are given up for dissection in France?—The bodies of criminals are not given up for dissection.

532. Do you think that tends to the existence of a feeling favourable to dissection in France?—I should suppose so.

533. There is no occasion for the bodies of criminals being given up, the supply being ample?—Yes, inasmuch as those bodies which are found in the river, and placed in the Morgue, for recognition by friends, are not given up to dissection, in consequence of the supply being fully adequate from the hospitals.

534. If a law were passed in France to give up the bodies of criminals, do you not think that it would be prejudicial to the study of Anatomy, and would indispose the people to afford the present facilities to that study?—It might, in time, decidedly, judging from the feeling which exists in this country.

535. At the time of your being at Paris, what was the total number of English medical and surgical students there?—I had no means of positively ascertaining the number, but they might have amounted to about thirty or forty in 1822, when I first visited Paris; the number in each subsequent year rapidly increased.

536. The question does not refer to those attending your class, but the total number?—I think there were not above thirty or forty in 1822.

537. Do you include Scotch and Irish?—Yes.

538. Was there any considerable number from Ireland?—No, very few from Ireland; the greatest number from Scotland.

539. In what manner is the supply of bodies obtained in Dublin for the anatomical schools?—There are two sources from which they obtain a supply in Dublin, one source is the house of industry, which is the great poor-house of Dublin, containing, with the several hospitals attached to it, upwards of 2,000 patients, all being supported by government. When I was studying in Dublin, the chief governors of that institution were medical men, and they gave up readily all the unclaimed bodies of those who died in the establishment, and these bodies were sent to the College of Surgeons, in consequence of one of the surgeons of the house of industry being the lecturer on Anatomy there. The other source from which the supply was obtained, was a large burial ground called Bully's Acre, where the paupers are buried in consequence of no fees being exacted there; other burial grounds were occasionally resorted to.

540. This was the place to which the exhumators principally had recourse?—Yes.

541. Did any disclosures ever take place?—They took so little precaution in Dublin, in my time, in raising the bodies at Bully's Acre, that they never took the trouble of filling the graves after they extracted the bodies. It was universally known in Dublin, that all the bodies, buried in that particular burial ground, were taken up a few hours after they were interred.

542. From those various sources an ample supply was obtained for the anatomical school in Dublin?—Yes, an ample supply.

543. Have you at all considered the supply which might be derived from workhouses in this country?—I am not sufficiently well acquainted with workhouses in this country to form an opinion.

544. Will you have the goodness to state why you have been induced to give up your own private school?—The expenses of it are so very considerable, in consequence of the charge for dead bodies, and it has occurred to me, as a beginner, that the resurrection men have exacted more from me than has been usually paid by others. I have paid fourteen guineas for a subject, which I had afterwards to give

give to the pupils for eight guineas, that being the usual sum paid by students for a dead body in London.

545. Is not this applicable to every private dissecting establishment in London?—I believe so.

546. The owners of private establishments not being supported, like the teachers at the hospital-schools, by the fees derivable from large classes of pupils, and the advantage connected with the use of the public theatre and dissecting room, are less able to pay the great price necessary for obtaining a supply of subjects?—I believe so.

547. Have you any doubt that the penal law in existence with regard to murderers, tends to aggravate the feelings of the public against dissection?—I have not.

548. Does it throw discredit over it, so as to prevent a voluntary appropriation of bodies?—Yes, decidedly so.

549. Do you not think that it would be better the public feeling should concur with regulations which might be proposed, than that there should be any positive law forcing those feelings, so as to oblige a delivery of any class of bodies?—Certainly.

550. You think that the delay which would take place before that feeling was removed to the extent required, would not be very detrimental to the interests of science?—I think not.

551. That the delay would not oblige the schools to be shut up for any period of time?—I think not.

552. Does any thing else occur to you on this subject?—No, except with regard to the importation of subjects; every thing exported from Paris must undergo inspection by the custom-house officers of that city, and subsequently it is liable to an examination again at Calais. These examinations therefore render exportation almost impossible; I also know, as a fact, that on an application being made to one of the individuals high in the custom-house department at Paris, to accede to the exportation of dead bodies, he expressed the highest indignation at the idea of sending the bodies of Frenchmen for dissection to England.

553. Do you imagine it is possible to attempt to carry on a regular supply of dead bodies from France to this country, without its acquiring publicity or coming to the knowledge of the police in Paris?—It is almost impossible to bring over any considerable number of bodies from Paris, without the fact being generally known.

554. Should you not anticipate that the medical schools in Paris, which derive so much advantage from the resort thither of so many students in medicine and surgery, would be opposed to the exportation of subjects?—I believe they would oppose the exportation, and particularly at present; for dead bodies are not procured with such facility at present as formerly in the Paris school, in consequence, as I before observed, of the priests interfering, and prevailing on the friends of the persons to bury them more frequently now than formerly.

[The following letter was read.]

Paris, 18th April.

“ Dear Sir :—I am sorry it has been out of my power to communicate to you sooner the information you requested me to obtain for you, respecting the number of English medical students who come here annually to prosecute the different branches of their profession, and in particular that of dissection. From the records kept at the School of Medicine, it has been ascertained, that upwards of a hundred British medical students take out inscription tickets; and from what I have been able to learn, from various sources, an equal number do not take out inscription tickets, so that the average number of such students in Paris may be estimated at two hundred, the greater number of them being here for the express purpose of obtaining dissection, and besides, of practically acquiring operative surgery, the number of dead bodies afforded by the hospitals being such as not only to enable them to perform themselves the various surgical operations, but to see them performed by professors who have at their disposal almost an unlimited number of bodies. I believe I have nothing further to add to what I had the honour of stating to you when in London, as to the mode of supplying bodies for the above purposes, adopted by the French administration of hospitals. In one word, all unclaimed bodies may be employed for the purposes of dissection, and are regularly brought from the different hospitals of the metropolis early in the morning in covered waggons, and deposited in the two great schools of practical Anatomy, La Pitié and the École de Médecine. The former is destined for public dissections, and students of every country are admitted to it gratis, having only to pay a trifling sum for each body they dissect; this sum is fixed by the administration at the rate of from two shillings to about seven shillings, according as the body has been opened, is unopened, or injected. The latter is set apart for a particular class of students, and for the preparation of anatomical or other dissections for the School of Medicine, the whole being under the direction of a physician, named Chef des Travaux Anatomiques, who has from three to four assistants, or aides d'anatomie, who direct the studies of the

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students of this school. In the school of La Pitié, on the contrary, the student is left to his own resources, the operator there having nothing more to do with the student than to see that he is supplied with bodies, and that due attention is paid to order, cleanliness, &c. The students of this school, however, may receive practical instructions from intelligent young men, generally house surgeons, by paying them a moderate sum, which includes also the price of subjects. Should you require any further information on this subject, I shall be happy to do my utmost to obtain it for you.

"Believe me to remain, dear Sir, with esteem and respect,

"Your very obedient servant,

"No. 5, Rue d'Assas.

"R. Carswell, M. D."

"To Henry Warburton, Esq. M. P.

555. Should you concur in the statements of Dr. Carswell, contained in that letter?—I would.

556. In the studies of the English students which you superintended in Paris, did it form a part of the course, that they should perform on the dead body the principal surgical operations which they may be required to perform on the living?—They all availed themselves of the extreme cheapness of subjects to perform the operations.

557. Did you, as superintending their studies, aid in teaching them to perform those operations?—Yes, I did.

558. You consider that an essential part of surgical instruction?—Yes, I do.

559. Do you consider the French students in general better qualified to enter on their practice than the English?—They are certainly in respect of operations; and the Dublin students are also much better qualified than the English or Scotch.

560. Have you had occasion to see what is the practice in the provincial towns in France?—No, I have not; I am acquainted with the general outline of the system of education, but I have no knowledge of the state of the profession in the provincial towns.

561. Having had the opportunity of observing the students in Dublin, Paris, and London, when they have finished their courses of study, is it your opinion that their competence and consequent utility, on quitting the two former schools, are greater than on quitting the latter, owing to the full advantages of dissection which are to be had at the two former?—Certainly they are greater in those schools where the opportunities of cultivating Anatomy are most abundant.

562. Would not that in a very short time give a decided preference to the practice of surgery in France over that in England, if some remedy be not provided?—It certainly would; in England the study of Anatomy almost exclusively refers to the practice of medicine or surgery, the attention being almost solely directed to certain portions of the body where particular operations are performed. Surgery, in the hands of those high in their profession in England, is perfectly on the same level with surgery in France; but when we come to consider Anatomy as a science, and Medicine as a science, it will be admitted that the continental medical men have gone far beyond the English in the cultivation of these sciences; in the practice they have not, for they reject the empiricism which we have recourse to, when science fails us.

563. Is it not of great importance for the discovery of new organs and new functions in the human body, that those persons who have already completed their studies in Anatomy should have an ample supply of bodies for examination?—Yes, it is.

564. From what you know of the supply of bodies in this country, can they be easily obtained here?—No, they cannot.

565. Do you wish to state anything further to the Committee on the subject of the various difficulties and inconveniences to which the profession is here subjected in endeavouring to obtain a supply of bodies?—I have been only two years teaching Anatomy in London, and am not so well acquainted with the details as the gentlemen who have preceded me.

Veneris, 2^o die Maij, 1828.

David Barry, M. D. called in; and Examined.

David Barry, M. D.

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566. YOU are a physician, practising in London?—I am.

567. You have resided some time in France, and have taken your degree of doctor in physic there?—I resided more than four years there, and am a doctor of the faculty of medicine of Paris.

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568. Can you state what is the number of pupils following dissection in the schools of Paris?—In the first three months of the scholastic year of 1827, there were nearly 1,500 inscriptions taken by the pupils of all classes; and besides those 1,500, there is always a considerable number who do not take inscriptions, who have finished their studies, but defer taking the degree of doctor for particular reasons, and who dissect; there are also English students who do not take inscriptions, but who dissect.

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569. Will you more particularly describe what an inscription is?—A pupil that enters in the university of France with the intention to become a medical man, either as a doctor or an officier de santé, (we have nothing parallel to the latter in this country,) has his name inscribed before the 15th of October, with his birth-place, his age, his certificate of baptism; and he receives from the Bureau of the Faculty a ticket, showing that he has inscribed himself, and paid a certain sum of money. October begins the first quarter of the scholastic year; the second quarter begins in January.

570. Can you form any estimate or guess as to the number of those who do not take inscription-tickets?—I can; I have a letter from Paris from a friend of mine, dated 17th of April, in which he says, that with regard to the English, there are 200 English students at present in Paris, 100 of which take inscriptions, and the others do not; they merely dissect.

571. In that respect your letter agrees with the letter of Doctor Carswell?—So it appears; here is the Almanac de Médecine for 1827, and this gives the number of inscriptions taken in each three months for the year, and also the number of those that are received as officiers de santé; the number that have passed their theses, or been received as doctors, is also given; I believe these last amount to 215: now I am inclined to think, from what I know of the school, that the greater portion of the doctors did not take inscriptions during that year, because passing the doctorship deprives them of the power of becoming house surgeons, or prosecteurs, or pupils to hospitals (called élèves internes), or aides d'anatomie; therefore they defer the taking the doctorship until they are prepared to settle, because it deprives them of those advantages.

572. Will you describe more particularly what are the duties of those different degrees which you speak of; what is the duty of officier de santé?—The officier de santé is obliged to take only three years inscriptions; he is obliged to attend the courses, only during those three years, in anatomy, physiology, natural history, therapeutics, surgery, and medicine; he has three public examinations to undergo, and after he has passed those successfully, he is limited to a particular department, out of which he cannot settle, and he can perform no surgical operation, except under the superintendence of a doctor of surgery or a doctor of medicine.

573. Is the officier de santé the lowest description of medical degree that a person is allowed to take?—Yes.

574. What intermediate degrees are there between an officier de santé and a doctor of medicine?—None; there is the doctor in medicine, the doctor in surgery, and the officier de santé; the education of a doctor of medicine and a doctor of surgery is precisely the same, the difference only being in the fifth examination, and in the nature of the thesis: the degree is taken either as doctor of surgery or doctor of physic; and if a doctor of physic wishes to become a doctor of surgery, he has only to write another thesis upon a surgical subject, and *vice versa*.

575. The general education, then, of a doctor of physic and a doctor of surgery is the same?—Yes, precisely.

576. You have made use of a word that has not been defined; what is the office of prosecteur?—The prosecteur superintends, under the chef des travaux anatomiques.

577. Is he the same officer that Mr. Bennett has described as the aide d'anatomie?—No, he is not; he is superior to the aides d'anatomie.

578. How many prosecteurs are attached to each of the two principal dissecting schools at Paris?—There are three prosecteurs and three aides d'anatomie at the Ecole Pratique.

579. How is it at La Pitié?—I know of but one prosecteur at La Pitié.

580. Will you describe particularly what is the difference in the systems at the two establishments of La Pitié and the Ecole Pratique?—At the Ecole Pratique only such pupils are allowed to dissect as have by a public examination distinguished themselves, and rendered themselves worthy of becoming members of the Ecole

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Pratique; and they have the advantage of having their subjects, whether opened or not, at three francs, fifty sous.

581. All who enter?—Yes, all who are members of the Ecole Pratique; and they have also the first claim to subjects before all other people.

582. Are all persons, to whatsoever nation they belong, if they have so distinguished themselves, admitted to dissect at the Ecole Pratique?—I believe they are.

583. Will you describe the system at La Pitié?—At La Pitié there are several large halls or rooms, fitted up with tables on each side, some of them leaded, and some of them boarded, with tubes conveying water, and conveniences for keeping the place clean, and it is only necessary to be introduced there as a person attached to the study of medicine; I do not know that it is even necessary to show an inscription at the Faculty; the person so applying inscribes his name upon a list, saying he wants a subject, and when his turn comes he gets a subject.

584. Then it is to La Pitié that the greater number of English students, resorting to Paris for the purpose of dissection, have recourse?—I believe it is; there is, however, an exception to that, as Monsieur Breschet, the chef at the Ecole Pratique, takes in English pupils under his own protection, and gives them from his authority permission to dissect.

585. Then students of whatever nation are also admitted to La Pitié to dissect?—Yes.

586. Will you describe what is the difference in the system of medical and surgical education pursued in France and in England?—There is but one school of medicine in Paris, and to that school there are attached twenty-four senior professors, and twenty-four junior professors; the time spent in following the courses of these professors, cannot be less than three years for the officier de santé, nor less than four years for a doctor of medicine or surgery; those years must be consecutive, and the study certified by the different professors; the examinations are all held in public; to obtain the degree of doctor, either in medicine or surgery, six public examinations must be undergone, with an interval of at least three months between each two; the result of the opinion or judgment of the professors examining the candidate, is posted up in the public hall, and upon the nature of this judgment, in a great measure depends the future character and success in life of the candidate; in England, I believe, I need not explain it.

587. Is it not considered indispensable in France, that the candidate for a diploma, should have pursued a course of practical Anatomy?—Most certainly; in France, he must not only pursue a course of practical Anatomy, but he must absolutely and actually dissect; independent of those already mentioned examinations, the candidate for a doctorship, must be a bachelor of letters and of sciences, and deposit his diplomas at the bureau of the Faculty, before he can take his inscription, before he can begin his four years of medical study.

588. Is it considered indispensable in a course of medical and surgical education in France, that the student should perform upon the dead body the principal operations required to be performed upon the living?—Most certainly.

589. At the time of taking his degree, is he required to give evidence of his skill, by performing on the dead body, before the judges, any of those operations?—At the fifth examination, the candidate is obliged to apply bandages, and go through the minor operations, upon a statue or figure, not upon the soft subject. Another circumstance attached to an officier de santé is, that he cannot give his opinion before the tribunals; his opinion cannot be acted upon with regard to death by poison, wounds, accidents, &c.

590. Is there not attached to La Pitié, a gentleman of the name of Monsieur Lisfranc, who is celebrated for teaching the mode of performing upon a dead body the principal surgical operations?—Yes, there is.

591. Are not his demonstrations frequented by a very large number of English students who resort to Paris?—Particularly so, almost by every one.

592. Do you know of any similar course given in this country?—I know of none; I have studied in Dublin and in this country, I know of none.

593. Do you not consider that course of surgical instruction of the highest importance?—I certainly do.

594. Should you not think it unsafe to commit yourself, for the performance of a difficult operation, to a surgeon who had never performed upon a dead body, an operation which he was required to perform upon the living?—I certainly should, unless he had acquired the necessary dexterity by having operated upon the living body.

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595. But if he begins to perform upon the living body, before he has performed upon the dead body, he necessarily, until he acquires that experience, must perform those first operations in a very awkward and insufficient manner?—Most certainly, and independently of Monsieur Lisfranc's demonstrations, each pupil may have as many subjects as he pleases, and operate upon them himself, or in company with other pupils: they instruct and help each other at La Pitié; I say this in relation to statements made by some witnesses examined yesterday as to the English schools, some stating two subjects, and some that three were enough. I conceive that there is no eminent surgeon in Paris who has not, in the course of his education, dissected and operated upon more than thirty subjects.

596. What should you yourself consider, with every view to economy in the use of subjects, sufficient for an adequate course of surgical instruction?—I should think four subjects in a season would be the very least, for two seasons at least.

597. Therefore you would allot to each student, upon the whole, eight subjects?—Yes, certainly.

598. Do you confirm the evidence that has been given by the witnesses yesterday, during whose examinations you were present, as to the price of subjects at La Pitié?—Yes, certainly, the price is correct.

599. Will you state what becomes of the bodies of criminals executed in France, are they given up for dissection?—I know they have been used for dissecting or experimental purposes at the Ecole de Médecine; I am not aware that the code mentions they shall be given up for dissection.

600. Under the article fourteen in the Code Penal, might they not be given up, unless they are reclaimed by the families of the parties; "the bodies of those who have been executed shall be delivered to their families if they reclaim them, the families engaging to pay the expenses of the burial, without making any public display?"—Certainly, it appears so.

601. The school has no claim upon them?—I believe not.

602. Do you know whether the chef des travaux anatomiques distributes the bodies of those executed, which are not reclaimed by the families?—I never knew an instance of it; but they consider it important to examine those bodies, because it is rare to see the viscera of a man who dies in full health, as some of those do.

603. The bodies that are distributed to the dissecting schools being sold at a certain price to the pupils who dissect at Paris, what is done with the proceeds arising from that sale?—The proceeds are employed by the administration of the hospitals to defray the expense of carriage and burial of the remains.

604. Will you describe more particularly the manner of obtaining and afterwards distributing the bodies to the dissecting schools at Paris?—The only connection that the student at the hospital has with bodies, is while the man is a patient in the ward, and is in his last moments, and again when he sees him on the table of the clinical lecturer. What becomes of the body in the interval, between the dying in the ward and the lecture upon his viscera or appearances after death, I am not personally acquainted with; but I believe they have a chapel attached to each hospital, in which they place the body that mass may be said over it. If the friends claim the body after it is opened, it is given up, decently sewed up in canvas. The wounds that have been made to examine the viscera are sewed up, and the body is delivered in canvas, or in a shell brought by the friends.

605. Claimed within what time?—Twenty-four hours, I believe. The cart that conveys those bodies sets out very early in the morning from the different hospitals; for instance, the bodies that are furnished to the Ecole Pratique are sent from the hospitals of Bicêtre, Beaujon, St. Louis, St. Antoine, the hospitals of Necker and the Enfants Malades; they are sent in a covered cart, so constructed as not to attract public notice. The bodies having arrived, suppose at La Pitié, they are taken out from the sacks in which they were brought, and deposited in a particular building devoted to that purpose; the prosecteur then comes with his list of those that have inscribed themselves for subjects, and distributes them accordingly; the pupils, according to their merit, have the right of choice first; if there is not room in the Ecole Pratique, the student then claims his right of priority. At La Pitié the servants of the dissecting-room collect the remains, sew them up again in the same coarse cloth, and convey them to the nearest place of interment.

606. Are the funeral rites performed over the remains before they go to the dissecting-rooms, or after the remains are finally taken away?—I believe the church has nothing to do with them after the bodies are taken away from the hospital.

607. Do you think, if there was a penal law introduced into France that gave up the

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the bodies of murderers to the dissecting establishments, it would tend to diminish or promote the present facilities of obtaining bodies in that country?—I do not think it would make any difference whatever, and I think myself that the distinction that the English law establishes between a dead murderer and a dead pauper, is rather salutary to general morality, and will not in the least interfere with the furnishing of subjects.

608. You do not think that the stigma which attaches to the dissection of murderers, tends to aggravate the general dislike to the practice of dissection?—No.

609. You have stated that it was of importance to have some subjects to examine that died in a state of health?—Yes.

610. How are they to be obtained, except in the way they are obtained here?—I know of no other way. It is of so much importance, that Magendie, the celebrated physiologist of France, quotes the state of the viscera of subjects that had been guillotined in his book.

611. But it not being compulsory by law to deliver up people executed in France, though in France the surgeons possess advantages in every other respect, in this respect, namely, the examination of bodies dying in health, they have less advantages than are to be found in England?—Yes, I would say that there are less capital punishments there.

612. And for both reasons there is less advantage in France than here, as far as the examination of bodies dying in health are concerned?—Yes.

613. Are you aware of the number of bodies in a given period given up for dissection, who have been executed in this country?—I have not the slightest idea.

614. What is the result of your experience as to the practice in the Portuguese schools?—Medical science, as far as regards Anatomy, is at a low ebb in Portugal; and for whatever dissection is practised there, the subjects are had from the hospitals called Misericordia, equivalent to the Hospital de la Pitié, or charity in France.

615. Are there any professed schools of Surgery and Anatomy at Lisbon?—I refer to Lisbon, Coimbra, and Oporto; there is an university at Coimbra where Anatomy is taught.

616. Do you remember the number of pupils at any of those schools?—Not exactly; the number of dissecting pupils was always very small, never amounting to twenty.

617. Was an ample supply of bodies obtained for the wants of those pupils?—Most ample; there is not the slightest objection to the disposition of bodies; the supply was particularly ample of children, from the number of children put into the *roda*, or foundling cradles; they die in great numbers, and may be had for asking for.

618. You do not think in Portugal the practice of dissection is opposed by any state of public feeling?—Not at all, yet it is conducted with decency and secrecy, so as not to outrage the feelings of individuals.

619. Does any thing further occur to you as to the schools of Portugal?—No, nothing further.

620. Does the practice of exhumation prevail there?—I believe it was never heard of.

621. Are the bodies of criminals given up for dissection?—I believe not; the bodies of criminals are given up to the brotherhood of the Misericordia, who inter them with quick lime at their own expense.

622. Have you had any particular means of ascertaining, in England, whether the dislike attaching generally to dissection is aggravated by the bodies of murderers being given up for dissection?—I have no particular data to go upon, further than my own judgment in the affair; I think that the prejudices against dissection are very few, if any, in England, and that they are not increased by the bodies of murderers being given up. Dissection abstractedly considered, nobody feels any abhorrence to; it is only as connected with their own relatives, or their own future dissection, that they feel any thing upon the subject.

623. It is to the practice of exhumation you attribute in a great measure the prevailing dislike?—Most certainly.

624. Do you conceive that if the bodies of those who died in hospitals and workhouses and were unclaimed by their relatives, were given up for dissection, that the public would have much objection to such a practice?—I conceive, that if unclaimed bodies were permitted by law (not forced) to be given up to dissection, the English public would support the measure most heartily.

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625. Having heard the evidence given on a previous day relating to the difficulties to which the surgeons in England are subjected, and with regard to the remedies suggested for obtaining a better supply of subjects, do you concur in the opinions that it would be expedient to obtain a supply in future of the unclaimed bodies from hospitals and workhouses?—I conceive that to be the very best mode of supplying subjects.

626. Do you consider from what you have heard of the number of those who die in the different hospitals and workhouses, that the supply so obtained would be sufficient?—I conceive quite enough.

627. In Portugal you say the dissection is conducted with great decency, do you allude to any particular regulations on the subject?—No, except the exclusion of all those not particularly connected with medical studies.

628. Does the practice prevail in Portugal of burying the remains of those who have been dissected?—Always in consecrated ground.

629. Do you think if it were permitted to dissect the bodies unclaimed in hospitals and workhouses, and if a regulation of burying the remains with decent funeral rites were to be enforced, that the repugnance to dissection would thereby be diminished?—If properly qualified persons receiving subjects were bound to give christian burial to the remains, it would do away with all prejudice.

James Richard Bennett, Esq. again called in; and Examined.

630. IS any person allowed to open a dissecting school at Paris, at any other place than at one of the two leading dissecting establishments?—No, they are not.

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631. The facilities for dissection, given at those two leading establishments are so great, that private dissecting rooms are quite unnecessary?—Quite unnecessary.

632. Are there not certain pupils at the Hopital de la Pitié, who have certain privileges?—Yes.

633. Will you state who are the pupils that are allowed these privileges?—At Paris, there are attached to each hospital a certain number of pupils, who are denominated *Elèves Internes* or house pupils; those persons are annually elected to the office at a public examination, and each holds the office a certain number of years. Those individuals have the first choice of the subjects at La Pitié, and at a less cost than the ordinary students.

634. Of whom does the other dissecting establishment, the *Ecole Pratique*, consist?—The *Ecole Pratique*, is the name generally applied to the dissecting establishment under the immediate governance or control of the school of medicine, and only such pupils are entitled to dissect there, as have entitled themselves to the privilege by having distinguished themselves at an examination held for the purpose. A certain number is admitted yearly, and the aggregate or the class of pupils that so distinguish themselves, constitute the body called the *Ecole Pratique*; but other individuals, even foreigners, are occasionally admitted as a favour, to the dissecting rooms.

634.* What is the establishment for dissection at the *Ecole Pratique*?—There are a number of dissecting rooms, which are placed under the control or direction of the superintendent, who is called the *Chef des Travaux Anatomiques*, and under him there are young men appointed as his assistants, who are denominated *Prosecteurs* and *Aides d'Anatomie*; those individuals teach and guide the students in their dissection.

635. Is this *chef des travaux anatomiques*, of whom you speak as attached to the *Ecole Pratique*, the same individual who bears the same title, and has the care of the general distribution of the bodies in Paris?—As I observed before, each of the two dissecting establishments has a *chef des travaux anatomiques* for its superintendence and management; the allotment of the subjects from the several hospitals to the dissecting establishments is made by an officer connected with the administration des hopitaux, whose title I forget.

636. What is the establishment for dissection adjoining the Hopital de la Pitié?—It consists of two or three large dissecting rooms and some smaller ones placed above them. The great rooms are open to all medical students, who are only required to pay for the subjects they dissect, without any further charge. The smaller rooms, in my time, were hired out to those individuals who wished to dissect in private. There is also a *chef des travaux anatomiques*, at the dissecting establishment adjoining the Hopital de la Pitié, who superintends the dissections there; and under him there are two *prosecteurs*, who regulate the details of the establishment.

637. Is there any other explanatory matter that you would wish to state to the Committee?—I beg to observe, that attached to each hospital, and occasionally in one

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of the public wards, there is an altar erected and a priest is attached to each hospital; I have frequently seen the service of the dead performed by those priests over dying patients.

638. Are the chefs des travaux anatomiques paid by the government?—At the Hopital de la Pitié the chef des travaux anatomiques is paid by the administration des hopitaux; at the Ecole Pratique the chef des travaux anatomiques is paid by the school of Medicine.

639. You have stated the mode of distributing dead bodies in Paris, which is very much facilitated by the hospitals being under one administration; in this country, as the hospitals are not under one general administration, it is fit to ask you, whether you have any thing to suggest as to the peculiar provisions that would be necessary for the distribution of subjects?—I think the fact of all the hospitals in Paris being under the government of a single administration, facilitates very much the supplying subjects for the purposes of dissection; and in addition to that, the circumstance of the administration des hopitaux being composed of the highest and most distinguished persons in Paris, those prejudices do not prevail amongst them which are found to influence the governors of the hospitals in London, some of whom occasionally belong to the middling classes of society; but I could not presume to suggest any remedy in the way of assimilating the government of the London hospitals with that of the Paris hospitals, for the purpose of obtaining the advantage alluded to.

640. The supply of dead bodies in Paris is derived not only from the hospitals, but those great workhouses, called the Salpetriere and Bicêtre?—Yes.

640.* Have you any thing to suggest as to the provisions necessary in this country, where there is no general administration of hospitals, and where the workhouses are not only more various, but under different governors?—I should presume their being under different governors in this country, taking into consideration the rank of life of those who have the government of them, that it materially operates against the giving up the subjects for dissection.

641. You do not consider the difficulties here of such a nature, but that by prudence and in the course of time they may be surmounted?—I do not.

642. You think it would be better done by some sort of an establishment?—Yes.

643. What do you know as to the manner in which subjects are obtained for the large towns in the provinces in France?—I do not know from actual experience, not having studied in any of those schools; but I have understood, from a variety of circumstances, that in the very large towns, such as Lyons and others, there are very great facilities in getting bodies from the public hospitals: in some of those large towns there are what are denominated secondary schools existing, and they are supplied from the large hospitals.

644. Are they supplied abundantly?—I believe, in Lyons, they are very much so.

Gustav Himly, M. D. called in; and Examined.

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645. YOU have some experience as to the practice in the hospitals and dissecting schools in Germany?—Yes.

646. What is the mode of obtaining dead bodies for the dissecting schools in those universities in Germany with which you are acquainted?—I am best acquainted with Göttingen.

647. What is the mode of obtaining bodies there?—Every person dying in prison or penitentiary is given up to Anatomy, that is not only in Göttingen, but they are sent from the great penitentiaries in Hameln, a town eight German miles from Göttingen, and from another at Moringen, which is two German miles from Göttingen; persons who cannot pay for their burial in town, are given up to Anatomy; the poor people who are supported at the public expense, are obliged to be given up, and it is often the case that poor people give up their body and get money for it; all persons executed are given up to Anatomy; public women are also given up. Those who die in hospitals are not given up, they are only opened in the hospitals.

648. How do the police determine who are public women; have they licences?—No, not at Göttingen; at Berlin it is so; but if a woman is not married and has a child, then she is given up to Anatomy; or I think it is after having two children; but it depends upon whether there is a want of bodies from other sources; for instance, in summer, when they are not required, they are not very often claimed.

649. Are the bodies of those who die in prisons and penitentiaries, given up for dissection,

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dissection, whether the friends claim their bodies or not?—They never are given up to Anatomy, if they are only imprisoned before trial; but if it is for punishment, then they are given up: if they are claimed, they are not given up, if the family pays a certain sum instead of the body to the funds of the anatomical school.

650. Is any supply obtained for the dissecting schools by the purchase of bodies from the friends after death, or from persons themselves while yet alive?—Not by the funds of Anatomy; the physician might do it for himself, but not for the public establishment.

651. Are the bodies of those who die in the public hospitals given up for dissection?—No, they are not; they are opened in the hospital itself.

652. By opened, do you mean that they are completely dissected, or only examined?—Only examined, and the disease they die of ascertained.

653. Do you know the number of pupils in Göttingen, or at Berlin?—I cannot tell that exactly; I should also state, that a person who dies by suicide, is given up to dissection also; but if any one claims them, they get them back by paying a sum of money; if it be a person of family, the professor would think that it would disgust the students to dissect this body; he therefore would not take it; for instance, if a student himself commits suicide, no other student would dissect him.

654. Do the Committee understand you, that the body of any person dying, under those various circumstances you have enumerated, may be reclaimed by the friends on their paying a sum of money?—Yes.

655. Is that the law of that part of Germany, or is it the custom?—I cannot tell.

656. At what price can a body be reclaimed by the friends?—I think it is twenty dollars; I do not know whether it is so high.

657. Is the supply of subjects from those various sources ample for the wants of the dissecting schools?—Yes, every student may have as much as he wants; the first course of dissection is only the body, as it is brought for the studying the muscles; in another course the arteries are filled with coloured wax, and so it is dissected to see the arteries and the nerves.

658. What are the different degrees, medical or surgical, that are taken at Göttingen?—There is only one degree, doctor of medicine and surgery, both together.

659. There is no inferior degree?—No, there is none.

660. How many years is a candidate for a degree of doctor of medicine and surgery required to have studied?—At least three years, but now it is usual to study four years at least.

661. Is he required to have dissected bodies before he can take that degree?—Yes, he is.

662. Is he required to have performed on a dead body the principal surgical operations?—That is not required to take the degree, but afterwards to make the second examination; at Hanover it might be required to get a license to practise surgery.

663. You speak in your last answer of a second degree which is required before a person is allowed to practise medicine or surgery?—Yes.

664. How many years is that after he has taken his first degree?—He may do it immediately after.

665. Is he required to undergo another examination before he obtains his license to practice?—Yes, he might practice without this examination, but not in the kingdom of Hanover; this is only for the Hanoverian states.

666. Does the having taken a doctor's degree in one university, at Göttingen for instance, entitle him to a license to practice in other parts of Germany?—No; he must then undergo an examination in the other country.

667. But must he go through the same studies in another German university before he is entitled to practice in the country to which that other university belongs?—That is very different in different countries; for instance, in Austria you can never practice, if you have not been there from your seventh year; and in Prussia you must at least have two examinations, and study one year in a Prussian university.

668. Do you know whether that examination which is required at Vienna for obtaining the degree of master in surgery, is required in any other part of Germany for obtaining a license to practice?—Yes, it is at Berlin.

669. What is the nature of that examination which the candidate is required to undergo?—The candidate takes by lot one part of the human body, and he must make a preparation of it; he must dissect it as far to show distinctly the arteries, the nerves, and so on; and after having done this, he must explain it publicly; he must make a lecture upon this part of the body; and then by another lot he must perform an operation publicly upon a dead body, or upon two dead bodies, and he must make
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bandages for it publicly before the Committee, and all who like to be present; besides that, he must cure two medical and two surgical patients.

670. Is the practice of exhumation had recourse to in any part of Germany with which you are acquainted?—No, it never is.

671. It would be considered in the highest degree disgraceful?—Yes, and if discovered, severely punished.

672. Does that disgrace, which in Lower Germany attaches to those who touch the bodies of animals that die a natural death, attach to surgeons in consequence of their dissecting?—No, it does not; even if there are executions, the surgeons go near to observe the body.

673. Is there any considerable degree of prejudice in Germany against the practice of dissection?—Not at all.

674. You have stated that two sources of supply are the bodies of criminals and of public women?—Yes.

675. Do you know how many criminals have been executed for the last five years at Göttingen?—I studied at Göttingen four years and a half, and there was no one executed at all during all that time.

676. You have said that students would object to dissect persons of family; do you mean by that persons with whom they are acquainted?—Yes.

677. In consequence of the bodies of criminals and public women being given up for dissection, does not disgrace attach to the circumstance of dissection?—No, it does not; poor people even sell their bodies.

678. Are funeral rites performed upon those bodies before dissection or subsequently?—Subsequently; but there are no great funerals at all in that part of Germany; almost every one is buried in the morning, very early, without any ceremony, unless it is a man of any public character, for instance a professor; but the students bury their fellow-students with a great concourse.

679. Is burial given to the bodies of the poor?—Yes; but they are not great funerals.

670. Are funeral rites performed over the poor?—No, the clergyman does not go; if he be a particular friend of the dead, he accompanies him perhaps and makes a speech over his tomb.

671. Is it the Calvinistic or Lutheran sect that prevails there?—The Lutheran; there are prayers, but no clergymen.

672. Are the prayers said over the remains?—No, they are not said, it is quite silent; the clergyman may attend if he likes.

673. Is any large supply obtained of the bodies of those who sell themselves?—Yes; but if people fear that others will make an outcry upon them, they give them up in secret.

674. Do you know the price paid under those circumstances?—No; but it is a stated price when people are poor.

675. Do you know the population of Göttingen?—Ten thousand five hundred.

James Moncrieff Arnott, Esq. called in; and Examined.

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676. YOU have some experience as to the practice in the hospitals and the dissecting schools at Vienna?—I have.

677. Will you describe to the Committee the mode adopted for supplying the dissecting schools?—The dissecting rooms are supplied with bodies from the Allgemeine Krankenhaus, or general hospital, a large hospital situated in one of the suburbs, capable of containing 2,000 patients, which is usually nearly full; no dissection is allowed in the hospital itself, but the bodies are sent to the university in the city, and dissection is carried on there.

678. How many students are there at the university?—The number of students in medicine and surgery amounts, I believe, to nearly eight hundred; and, besides the university of Vienna, there are other two in the Austrian dominions (exclusive of her Italian states), viz. Prague and Pest.

679. Are all the persons, who are allowed to practice in the Austrian states, obliged to go to one or the other of those universities?—They are obliged to study at one or other of these universities, or those of Padua or Pavia, or at one or other of the lesser schools called Lyceums, of which there are seven, I believe, in different parts of the empire, and where medicine and surgery are taught in a less complete manner than at the universities; but my experience is limited to Vienna.

670. Is

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670. Is the supply obtained in Vienna from this hospital, amply sufficient for the wants of the students?—Quite so.

671. Is recourse had to any other means of obtaining subjects than from the bodies of those who die in this hospital?—I ought to state, that besides this large hospital, allotted for medical and surgical cases and lying-in-women, there are two other hospitals, the Lunatic Asylum and that for children adjoining it, and bodies may occasionally be furnished from either of them; but the supply from the general hospital is understood to be generally sufficient.

672. You never heard of it being necessary to have recourse to exhumation or any such practice?—Never; such a practice is not known.

673. How many years is each candidate for a degree at Vienna required to have studied?—Five years for the degree of doctor in medicine, the same for doctor in surgery, and three years for master in surgery.

674. Is there any inferior degree?—Yes, that of the practitioners, corresponding to the class of barber-surgeons as they formerly existed in this country, and as they still exist in many other countries of Europe.

675. Do they undergo partially the same course of study for a smaller number of years?—They do; their course of study is much less complete, and is I believe of two years duration only; but I am not well aware of what is required of this class of practitioners.

676. Is it required of every person who takes his degree as doctor in medicine or surgery, that he should actually have dissected bodies?—They, as well as masters in surgery, must dissect bodies; it is a necessary part of the anatomical course.

677. Are they also required to have performed the best known surgical operations on a dead body?—The candidates for the degree of doctor in surgery, after having passed their first examination, are obliged, in the second, to perform publicly two surgical operations on the dead body; the masters in surgery are in like manner, in their second examination, obliged to dissect and give an anatomical demonstration of some part of the body, and to perform one surgical operation upon it.

678. Are they required as well to take their degree as their licences to practise?—Doctors in medicine, doctors in surgery and masters in surgery, can practise, I believe, in any part of the empire without a license, with the exception of Vienna, where some form is necessary to be gone through; the individuals corresponding to the class of barber-surgeons, who have passed at a lyceum, can only practise in the province in which this lyceum is situated. A license, strictly speaking, is I believe not necessary.

679. Do you believe the following to be a correct representation of the examination which a master in surgery at Vienna is required to undergo, before he receives his diploma?—[*Handing to the witness a book.*]—This account is a correct representation of one of the examinations of a doctor in surgery; and an operation is required to be performed in the same manner by the candidate for the diploma of master in surgery.

See printed Evidence, p. 15,
April 28.

680. Are all the patients who die in hospitals sent for dissection, or only those unclaimed by their friends and relatives?—The bodies of all who die in the hospital, must without exception be opened, if such is the will of the attendant physician or surgeon; and this is performed by a prosector of pathological anatomy appointed by the government for this purpose, and who removes such parts as he thinks proper or is willing to preserve for the museum; the bodies for dissection are those of the unclaimed.

681. Do you know whether a great proportion of those that die are unclaimed?—I believe a majority of those who die in the general hospital are not claimed.

682. What is the feeling at Vienna with regard to those who practise dissection?—It is managed so quietly that there is no feeling shewn upon the subject; no feeling is outraged.

683. Is there any limitation of the time with respect to bodies being kept, to allow the relations to claim them?—The regulation of the hospital is, that 48 hours do elapse before the bodies, to be interred at the expense of the government, are conveyed away for that purpose.

684. Do you wish to state anything further with respect to the practice at Vienna?—Bodies are also furnished for the practice of surgical operations.

685. Is the supply sufficient?—Yes; it is not so great as in Paris, but it is sufficient for all purposes.

686. Do you know whether the dissected bodies are treated with the same religious respect as the bodies of others, after the operation has been performed?—My impression

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pression is, that no religious ceremony is subsequently performed over them, but I am not aware of the practice upon that point; when the students had done with them, the remains were removed.

687. Do you know whether any religious ceremony had taken place prior?—I do not; but a regulation of the hospital, with regard to the interment of the unclaimed bodies, runs to the effect, that after having been sewn up in a cloth, they shall be blessed by the priest, and then conveyed at night to the burying ground.

688. There was no complaint of any breach of decorum?—No.

689. Do you wish to state anything to the Committee, either as to the nature of the grievances to which the profession is subjected in this country, or as to any means by which you think a supply of bodies could be obtained?—No; I am merely accidentally present, and could only repeat what has been already urged upon the Committee on these points.

690. Do you know whether any money is paid for the purchase of bodies at Vienna, and if so, what is the price?—Foreigners have bodies at the rate of four or five shillings.

691. Are great facilities given at Vienna to foreign students frequenting that university?—Great facilities are given; the government not only throws no obstacles in their way, but grants them certain advantages. Besides being allowed to attend the hospital and all the public lectures gratuitously, like the Austrian students, they are also allowed to take advantage of private courses of lectures with the professors, and which private courses are restricted to foreigners.

692. Do they attend for the purpose of dissection at the university?—If they dissect, they must have done so at the university; but foreign students visiting Vienna have for the most part already dissected, and go there principally with the view to avail themselves of the advantages offered for the observation of, and the witnessing the treatment of disease, in its large hospital, the well conducted clinics which it contains, and the abilities of the professors to whose charge they are entrusted. Of between 70 and 80 students, not natives of the Austrian dominions, who were there during the eight months I was at Vienna, but a few dissected.

693. The question related to the facilities given to foreigners to dissect?—It is merely necessary that you should introduce yourself to the professor of Anatomy; you are then admitted to the dissecting room, and bodies are furnished to you at from four to five shillings a piece from the general hospital.

694. Was dissecting allowed in any private rooms?—I am not aware that it was.

695. Do you happen to know whether the bodies of persons executed are given up for dissection?—I do not wish to speak positively upon that point, no execution having taken place at Vienna whilst I was there.

Gaetano Negri, M. D. called in; and Examined.

G. Negri, M. D.

696. WILL you state to the Committee in what manner bodies are obtained at Parma and Bologna, for the use of the dissecting schools?—Dead bodies are obtained from the hospitals for the purpose of affording instruction in the universities.

697. Is it a rule at the hospitals that the bodies of all who die there shall be given up to the dissecting schools?—Yes; if they are required.

698. Do you mean without exception, whether they are claimed or not by their relatives?—I think if a relation reclaims a body and will pay the expenses of the funeral, they will give up that body; but in general, the bodies of all poor people are examined by the physicians and surgeons of the hospital, or they are sent to the school of Anatomy.

699. Is the school of Anatomy attached immediately to the hospital, or is it a separate establishment?—A separate establishment in general in the university.

700. Is a large proportion of those who die at the hospitals reclaimed?—No; very seldom.

701. Is an ample supply for the use of the dissecting schools thus obtained?—In general it is so; but if for some time we have not a sufficient quantity of dead bodies, we are used to obtain dead bodies from the deposit of poor people who died, and are buried at the public expense. There is a deposit in which all the poor people who die are put, before they are carried out to the burial field; there is in every parish church in Italy a chamber, in which all the dead bodies of the poor people are deposited during the day-time, after the religious ceremonies have been performed over them in the church; and in the night, they are removed to the dissecting room or the burial fields out of the town.

702. Is

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702. Is it known to the poor that the bodies of those who die, are liable to be carried to the dissecting room, instead of being buried?—Yes, to those in the hospital; and in general poor people will consider it like a duty to give their bodies for public instruction, in reward for the charity which they receive from the hospital.

703. Then public feeling in Parma and Bologna is not much opposed to the practice of dissection?—Not at all; only in the higher classes, there is sometimes a difficulty in the physicians obtaining permission to examine a body; but in general there is no difficulty at all.

704. Is the practice of dissection in any degree opposed by the clergy.—Not at all.

705. How many years must a student at Parma or at Bologna have studied, before he is entitled to his diploma?—For his diploma of doctor in medicine or surgery it is necessary to study four years, and before he can exercise his profession, it is necessary to have two years practice in an hospital or a clinical school.

706. Is there any inferior degree he can take?—Only in surgery; there are three degrees in surgery: phlebotomy, lower surgery and the higher surgery.

707. How many years is he required to have studied for the inferior degrees?—For phlebotomy, only three years; for the low surgery, four years; for the higher surgery, six years.

708. Is it required of those who take their degree of doctor in surgery or medicine, that they should have actually dissected?—Yes.

709. Is it required also that they should actually have performed surgical operations on a dead body?—Those who are devoted to high surgery must do so.

710. You state that the funeral rites are performed on the bodies of those who die, before the period of their burial?—Yes.

711. It is not necessary, according to the rules of the Catholic church, that any subsequent rites should be performed upon them after they have been dissected?—No.

712. Is it considered that by not performing over them any subsequent rites, the bodies have been treated with disrespect?—No; they are buried without any funeral ceremony at all.

713. Is a large number of bodies required by those surgeons at Parma and Bologna, who follow surgery as a matter of scientific enquiry?—Not constantly; but there are a certain number of dead bodies necessary for instruction.

714. Is there any further information with regard to the practice in the schools in Italy, that you would wish to state to the Committee?—I can tell the Committee only, that to be admitted like a pupil of medicine and surgery, it is necessary to undergo an examination before in philosophy; not any one can be admitted without the instruction that is given in the schools, and afterwards they are obliged to undergo an examination every year for passing to the second and third, and so on.

715. As far as you have learned, is an ample supply of bodies obtained in all the medical schools in Italy?—Yes.

716. And in no part of Italy that you have heard of is the public feeling opposed to the practice of dissection?—I think not.

717. In no case have you ever heard of the practice of exhumation being resorted to, to obtain a supply?—No; I have never heard of it.

718. What price would a student have to pay for a body, suppose he was in want of one?—I cannot say any thing upon that, because we have always plenty without the expense.

719. Are foreign students readily admitted to dissect in the different schools in Italy?—Yes; but for dissecting it is necessary to have particular permission, because it is necessary to have a dead body by order of the professor of Anatomy.

720. Does dissection take place only at the university, or does it take place, also in private dissecting rooms?—At the university only and at the hospitals; but at the hospitals only for those pupils in practice at the hospitals.

721. Are the bodies of criminals given up by law for dissection?—Not by law.

Granville Sharp Pattison, Esq. called in; and Examined.

722. WHAT situation did you lately hold in the United States?—I was professor of anatomy and surgery in the University of Maryland, from the year 1820 to the year 1827.

723. Will you state to the Committee how subjects are obtained for the dissecting schools, with which you are acquainted, in the United States of America?—I can speak particularly of Philadelphia and Baltimore, which are the two great medical

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medical schools in the United States. In every town in America, there is what is called the Pottersfield, in which the bodies of strangers and the very poorest class of society are buried, and the supply for the dissecting rooms is obtained almost wholly from those pottersfields.

724. Do you mean that the supply is obtained by exhumation?—Yes.

725. Is the supply so obtained ample for the wants of the dissecting schools?—In Philadelphia and Baltimore quite ample; there is however an understanding with the municipal authorities, that the men employed by the schools will not be disturbed in removing the bodies from this pottersfield.

726. The practice of exhumation is opposed to the law of the United States as it is to the law of this country?—Every state in America has its own particular laws, and in some of the eastern states the laws against exhumation are quite as severe as they are in this country.

727. The common law of this country, generally speaking, being the foundation of the law of the United States, would it not be opposed to the laws of that country as of this?—In the state of Maryland there is a slight punishment, some slight fine, attached to a person detected in the act of exhumation; but all the municipal authorities give orders that those individuals, employed by the public institutions, shall not be disturbed.

728. Is the feeling of the public much opposed to the practice of dissection?—I think quite as much as in this country.

729. Do you think that that feeling is owing to the manner in which the bodies are obtained; namely, exhumation?—I have no doubt that that operates strongly in producing the feeling.

730. What is the number of students that you remember to have frequented the anatomical schools, either of Philadelphia or of Baltimore?—The last year I lectured I had in my class 347 students at Baltimore.

731. What do you consider to be the least number of bodies which a surgical student should dissect, to acquire such a competent knowledge of Anatomy and Surgery as should entitle him to practise?—I should consider that to be at all qualified even for the duties of a country practitioner, where it is not to be supposed he would be called upon to perform serious operations of surgery, that at least he ought to dissect the four great systems; that he ought to dissect them at least six times each; so that twelve subjects, I would say, would not be too much.

732. For each student?—Yes.

733. In that number of twelve, do you include the number necessary for him to perform the leading surgical operations upon?—A person may perform the leading surgical operations upon a body, and use the body afterwards for dissection; except the operations of amputation, the body is not injured by performing a surgical operation upon it.

734. Do you mean that twelve should be the number that he should have dissected during the whole course of his education, or the number in one year?—During the whole course of his education.

735. To what period would you extend the course of his education?—The lowest period, three years; certainly the very lowest period.

736. Are the bodies of persons, who have been executed for crimes, given up for dissection in the United States?—No, in no part of it.

737. What may be the price paid for a body taken from the pottersfield?—The highest price in Baltimore is from two dollars to four, at 4s. 6d. the dollar.

738. When you say the pottersfield is appropriated to strangers and the poorest class, you mean that those persons are buried there who are interred at the public expense?—There are some of the low free negroes who cannot pay for a piece of ground, buried there.

739. By strangers you mean those who have no friends to claim the bodies?—Yes.

740. Does the circumstance of there being a slave population in this southern province of the United States lead to there being a more easy supply of bodies than in the northern states?—There is certainly a much more easy supply in the southern than in the northern states; but that may depend partly upon the large slave population, and partly upon the number of strangers that there are in the southern cities.

741. Does the supply so obtained consist principally of negroes, or of whites?—I think about an equal part whites and negroes.

742. Do you understand that great difficulties have arisen in New York in obtaining a supply?—About eight years ago, from some imprudence in the persons employed in dissection, there was a riot in New York, and after the riot very considerable

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considerable difficulties were opposed to procuring subjects; I understand however now, although the supply is not so ample as in Philadelphia and Baltimore, yet still bodies can be easily procured in New York for ten dollars.

743. Do you not think, that if a law were passed in America, that gave up the bodies of murderers for dissection as in this country, it would augment the difficulties?—I have no doubt of it; and another point I would mention, although it may be out of place, that the bodies of criminals executed are not at all calculated for dissection, allowing the number was much greater for that purpose.

744. In what respect?—The body of a person in full health who dies a violent death, in the course of twenty-four hours has passed into a state of putrefaction.

745. Are there any public hospitals at Philadelphia or Baltimore?—Yes, there are.

746. Are the bodies of those who die there given up for dissection?—No, they are all buried, but the graves are frequently not filled up; a small quantity of earth being merely thrown in, and left in such a state, that a person going from the public institution can with very little trouble indeed exhumate the body.

747. Are they buried in a burying ground attached to the hospital, or in a public one?—There was annexed to one establishment, at a short distance from Baltimore, a small burying ground; but previous to that establishment the bodies were buried in the pottersfield.

748. How can any subjects in a healthy state be obtained, unless the bodies of those who have been executed, be delivered up for dissection?—Accidents afford a more abundant supply than murders.

749. And how can the healthy structure be observed but in the bodies of those who have met with violent deaths?—There is no change produced in the general structure of the body, except in the particular diseased part; if a person, for example, dies of consumption, with tubercles in the lungs, the structure of the lungs is changed; but the muscles, the blood vessels and the other parts of the system are not in any respect changed; there may be less fat about the muscles, but no change of structure.

750. With regard to your experience in the University of Glasgow, will you state what you know of the difficulty of obtaining bodies there?—When I studied in Glasgow, I was, for the last four years of Mr. Allen Burn's life, his demonstrator; at that time bodies were procured by exhumation, and the supply required for the teacher could be obtained; and for the pupils immediately belonging to the teacher, those bodies were always procured by the students themselves.

751. You mean that the pupils themselves disinterred the bodies?—Yes, always; every public teacher had what he called his private party; this consisted generally of eight students, and those young gentlemen went out themselves and exhumed the body.

752. Did you not think it a most distressing thing, that young men of education should be compelled to have recourse to such a practice, as the only means of learning their profession?—Certainly, most distressing; but that was the only possible way that a man could obtain anatomical knowledge.

753. Was the number so obtained sufficient or insufficient for the purposes of instruction?—Quite sufficient at that time for the instruction of the class, that is to say, to enable the professor to carry on his lecture; but there was no supply for the students to make dissections themselves, except a few students who were fortunate enough to belong to the private party of the professor; I suppose the whole time I studied in Glasgow, that there was not probably a single student, who did not either belong to the private party of Dr. Jeffray or the private party of Mr. Allen Burns, that had an opportunity of making any dissection; it was not only most abhorrent to the feelings, but attended likewise with very great personal risk; very frequently they were shot at, when engaged in the process of exhumating.

754. Do you remember any serious accident of the kind having happened?—I have known cases where a few small shots have been received, but no serious accident.

755. Is the state of public feeling on the subject still more aggravated in Scotland than in this country?—There has been a very considerable change since I left Scotland, and now the schools in Scotland are in a most deplorable state; it is now quite impossible to procure above two or three bodies in the course of a year by exhumation, and the plan that has been adopted, is to salt those bodies and dry them.

756. Do you not consider that even in your time, all the students who sought surgical education at Glasgow, were insufficiently educated?—Quite unfit for the performance of the duties of their profession.

757. From what you have learnt since you quitted Glasgow, do you believe it still

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to be the case?—I believe it is much worse; I went when in Edinburgh to the professor of Anatomy's lecture; he was lecturing upon a most important part of Anatomy, the muscles of the neck; and although I am very familiar with the parts there, they were so changed from putridity, and so unlike what they are in a state of nature, it would have been impossible for me to have formed an idea, if I had not known it was the neck of a subject, that the professor of Anatomy was teaching this important piece of Anatomy.

758. In your time, in what manner did the police or magistrates treat the practice of exhumation; were they vigilant in their endeavours to prevent or detect the commission of the offence; zealous to expose it to the public eye, when detected, and severe in punishing it, upon conviction; or on the contrary, were they disposed to tolerate and overlook the offence, as being, under the existing laws on the subject, an unavoidable and necessary evil?—On the contrary, they behaved with the greatest severity; in my own individual case, the first year I taught, there was a body disinterred, and there was a skull without teeth found in my dissecting rooms; and because this person had had no teeth, I was dragged away by the police, carried through the populace, pelted with stones; I was then indicted, and tried like a common criminal in Edinburgh, a man sitting on each side of me with a drawn bayonet.

759. What was the result of the trial?—An acquittal, which cost me 520 l.

760. With regard to the hospitals either at Glasgow or Edinburgh, is it the practice to give up the bodies of those who die in the hospitals, either for examination or dissection?—With the consent of the friends, the bodies are examined; but the consent is always required.

761. Do the friends always consent?—In the majority of instances they do; the professional man takes pains to obtain it.

762. Is any considerable proportion of the bodies of those who die in the hospitals, unclaimed?—A large number.

763. Are the bodies of those unclaimed, examined or dissected?—If the medical gentlemen require it, there is no objection made in the case of an individual who dies without relations.

A. B. called in; and Examined.

A. B.

764. IS it not your occupation to obtain bodies for the anatomical schools?—Yes, it has been for some years.

765. What are the causes of the present rise in the price of bodies?—Because they are scarce.

766. To what do you attribute their being scarce?—Because every ground in London is watched by men put into them at dark, who stop till day-light with fire arms.

767. Then very great risk now attends the obtaining bodies?—The risk is almost beyond describing.

768. Can you now obtain a sufficient supply of bodies, by raising them in London?—No, you cannot.

769. Are you obliged to obtain a part from elsewhere?—Yes, a part.

770. What are the risks to which you are subject in the attempt?—You are subject to be shot in the first place, and in the next place, if you are taken, the parish prosecutes you, and you may get six or twelve months imprisonment, according as the chairman likes.

771. Have you men in your employ for the purpose of obtaining bodies; that is, would you call yourself at the head of a set?—I have worked with one man for seven years.

772. Are the other persons who are at the head of parties, employed in raising bodies?—There might be some; but there are many who never supply the schools, and never will.

773. Are not the persons at the head of parties, in the habit of giving information against one another?—Yes, they are.

774. It is to that you ascribe a part of the present difficulties?—Yes, that has gone a great way towards exposing of the business.

775. In general, what punishment should you expect if you were caught in the act of raising a body?—I was sentenced to six months imprisonment.

776. Should you now consider the business as worth following, if you could find another?—Yes, it is worth following, if you can get subjects; a man may make a good

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good living at it, if he is a sober man, and acts with judgment, and supplies the schools; but that is now out of his power; there is so much difficulty.

(*To Doctor Somerville.*)—You have some experience as to the conduct of these men; some are persons who conduct themselves fairly in their situation, and some otherwise; will you state what you know of the conduct of the witness?—The witness is not one of those who live by other means but what he professes.

Is he one of those who inform against the dissectors, after supplying them?—No.

777. (*To A. B.*)—State what you know of the conduct of some of the other persons employed in raising bodies?—There is a great many of them that profess to get subjects, that I suppose do not get four subjects in a twelvemonth; a great many of them that has lately got into the business, and have almost been the ruin of it.

778. Is not the raising bodies sometimes a mere pretence for being occupied in other employments?—That I believe of a great many of them.

779. What are those employments for which you think the raising of bodies is sometimes made a cover?—I think for thieving, by the greatest part of the men that have lately got into the business; they are nothing but petty common thieves.

780. Does their pretence of being engaged in raising bodies, give them great facility for carrying on thieving?—Yes.

781. In what way?—Being out late at night; because if they are met by the police, they can say they are out getting subjects for the surgeons.

782. They have usually a horse and cart?—Yes, some of them keep them, and if not, they hire them.

783. Do you know of any cases in which men pretending to be employed in carrying bodies, were discovered in the act of carrying stolen goods?—Yes, I do.

784. Have they been detected by the police officers?—Yes, before the felony was committed; but the intention was to commit a felony; they had a horse and cart for it.

785. Do you think that many, besides yourself, of those employed in raising bodies, make a regular living by it?—I should suppose there are at present in London between forty or fifty men that have the name of raising subjects, and that there is but two more besides myself that get their living by it.

786. Do you include in this number of forty or fifty the Spitalfields gang?—Yes; I include a great number of them, but not all.

787. You do not think the number exceeds fifty?—It is about fifty; it might be greater; but there are so many, I do not know them all, though I have seen a great many.

788. What do those men do to prejudice one another, when they frequent the same church-yard?—If they find anybody else goes there and gets subjects, and they have not their share in the concern; or, when the subjects are sold, if you do not give them a part of the money, the next day they will go and inform against you, and have the grave opened; that has been frequently the case.

789. Have you ever known them to open the graves and leave them in disorder, for the purpose of creating an alarm?—Yes, I have.

790. Have you ever known them to leave the coffins sticking up in the church-yard?—Yes, I have, and the shroud over the ground.

791. Do the grave-diggers and sextons ever wink at the practices of those who raise the bodies?—If you get subjects for any constancy out of any burying-ground, you cannot do it without bribing those people.

792. Are you, by bribing, able to gain information regularly when bodies are buried?—If you are friends with a grave-digger, the thing will be all right to know what bodies to get; if you are not, you cannot get them.

793. Do not many refuse to take any bribe?—Yes, there are some (owing to others having lost the situation) who would not for 100 guineas consent to a body being got, if they have succeeded to one who has been discharged.

794. What is the greatest number of bodies you have got in any one time?—The most I have got was twenty-three in four nights.

795. What was the price then?—Four or five guineas; there was no difficulty in getting subjects then.

796. Do you know how many you raised that year?—No, I never kept any strict account of how many.

797. About how many?—Sometimes I got more, and sometimes not so many.

798. Did you ever get 100 in a year?—Yes, but it was only one year; perhaps the next year I did not get above 50 or 60.

799. Do you think it safe now to go into a burying-ground in London to remove bodies?—

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bodies?—No, it is very dangerous, because they have constables; either a man risks his life or his liberty.

800. What do you think to be the feeling in London, of persons of the lower classes in life, concerning surgeons having bodies for dissection?—They would not mind shooting a man as dead as a robber, if they caught him in a church-yard; if you were pointed out that you are a resurrection man, they are prejudiced against you.

801. Do you think the dissecting of murderers tends to increase the dislike of the lower classes to dissection?—In my opinion, the public think there are none fit to be dissected but very bad characters, through that very thing.

802. They think it a kind of penalty that ought to be attached to criminals only?—Yes; the public are prejudiced against every thing of the kind.

803. Do you think, if bodies were obtained in some other way, without raising them, that the public would then care much about surgeons practising dissection, for the purpose of their learning their profession?—I should think there would be prejudice for a little time, but in the course of time it would wear off.

804. Suppose the bodies of all persons dying in hospitals, complete strangers to this place, with no relatives whatever near, do you think the public would care much their bodies were dissected?—No; I should think the public would care nothing about it, because they would not know it.

805. Suppose the bodies of those who die in workhouses, and have no friends to claim them, were given up, do you think that the public would be much against that practice?—There is no doubt that the inhabitants of the parish where the workhouse was situated, would be prejudiced a little while; but they would come round after a time, and they would know it would be done for the good of the public.

806. How far do you think the Irish care about the bodies of their countrymen being dissected, provided they have been waked beforehand?—They are more against it than the English.

807. Do you think, provided the body had been waked beforehand, they would very much object to dissection?—Yes; they are so much against it, they would not mind killing anybody that did it.

808. Did you ever hear of any Irish selling the bodies of their relatives after the wake is over?—I never knew any instance of it, not myself; I never did.

809. You stated just now that sextons have so often lost their places from having an understanding with resurrection men, it was very difficult to come to such arrangements?—Yes.

810. Was there any particular cause that led to their losing their places?—Yes; they were informed against by other men in the business.

811. Do you think, if the law permitted the voluntary disposal of bodies to surgeons, for the purpose of dissection, that the practice of exhumation would continue?—No; because, if it continued, it would be the fault of the lecturers.

812. Do you not think the lecturers would have an object in promoting exhumation, in order to get bodies cheaper?—Now they pay very dear for them; I do not know how they would get them then.

813. If the law were altered in the manner alluded to, would you continue the practice?—No.

814. You do not think, if there were a tolerably sufficient supply from other sources, that the returns would be sufficient to induce you to encounter the dangers of exhumation?—No, I would never go to open a grave.

815. Would such permissive laws be the best protection to church-yards?—Yes, to supply schools; because, if they get the subjects from the hospitals and our workhouses, they would not rob the grave.

816. Have you ever been shot at?—Yes, and I suppose I was not above two yards from the men that shot at me; it was a little bit of ground behind a chapel; they laid by in the chapel for me and another man; we were after two subjects.

817. When you take bodies, you make no distinction between high or low, rich or poor?—When I go to work, I like to get those of poor people buried from the workhouses, because, instead of working for one subject, you may get three or four; I do not think during the time I have been in the habit of working for the schools, I got half a dozen of wealthier people.

818. Do you not usually work upon information?—Yes, I do.

819. Of the other men who are employed in raising bodies, how many are there you would consent to go out with?—Not above two or three.

820. Why

820. Why would you not go out with the others?—Because it would not be safe to go out with them.

821. Why not safe?—Because they are all thieves, and they never supplied the schools in their lives; they get a subject or two, and call themselves resurrection-men.

John Webster, M. D. called in; and Examined.

822. HAVE you had any experience in the schools of Germany and Italy?—I have visited almost all the principal medical schools of Germany, Italy, and France.

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823. You have heard the evidence of those witnesses who have stated the practice in the schools of Germany and Italy?—I have.

824. Should you confirm the evidence of those witnesses, as far as your knowledge goes?—I should most certainly.

825. Is there any information which you possess, and could add to the information already given?—With regard to the mode of examination at Berlin, I think I can state all the particulars, since Paris, Pavia, and Berlin, are the universities I have resided most at, having passed a winter at each.

826. Is there any thing peculiar attaching to the university at Pavia, either as to the mode of obtaining bodies, or the examinations that the candidates for diplomas are required to undergo?—I know of nothing particular, in addition to what Dr. Negri has stated regarding examinations and dissection at other Italian universities. The facilities for studying Anatomy are very considerable at Pavia; at no school I have visited, are they so great.

827. Are the bodies obtained from the hospital?—Yes, I have always understood so; and if that was not sufficient, they were obtained from other hospitals, in the Milanese territories.

828. Were you aware of the practice, that a supply was also obtained from the bodies of those paupers whose friends could not afford to bury them?—I cannot speak of my own knowledge as to that point.

829. Are the candidates for diplomas at Pavia required actually to perform surgical operations upon dead bodies?—I believe they are, and the examinations at Pavia take place, if I recollect right, every year; the student is examined, as to his previous acquirements, before he is admitted to another course, and there are several examinations; I cannot speak as to the exact mode; I was not examined there; at Berlin I was.

830. What is the practice at Berlin?—The facilities are great at Berlin, indeed all over Germany I never heard of any difficulty.

831. What were the sources from which bodies were obtained?—I understood they were from the prisons and hospitals; but I cannot speak as to legislative enactments.

832. What can you state as to the examinations which a candidate for a degree is required to undergo?—He must have studied at least four years in some university in Germany or elsewhere; one must be at Berlin.

833. And during those studies, must he have dissected, and performed operations on the dead body?—At Berlin they grant the degrees of doctor of surgery and doctor of medicine; generally speaking, the pupil takes the degree of both doctor of surgery and doctor of medicine; he is first minutely examined by the professors upon his knowledge of Anatomy, and all the other branches of medical science, at three different periods; he must afterwards publish a thesis, which he has to defend publicly, on a day appointed by himself, in the great hall of the university; when any professor or students, besides the two named for that purpose, may of course examine him, in any way they choose, upon the subject of his thesis, which, as well as the examinations, must all be in the Latin language. It is not required to dissect publicly to obtain a degree; I was not myself so examined.

834. Do you know the distinction between taking a degree, and taking out a license to practise, whether both are necessary?—In Prussia, and I believe all over Germany, you must first have a degree from a university, before you can obtain permission to practise, either as a surgeon or a physician; after two years, I think it is, you are examined by those appointed for that purpose, to get a license to practise in a particular state or town; but I understand this is more a municipal regulation, than appertaining to the university.

835. What is the price of subjects?—I never heard of any person paying for a subject; I did not dissect myself at Berlin, although I attended the anatomical and other professors.

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836. Is there more than one dissecting school, at Berlin, where dissections can take place?—In the university only, as far as I know, where the supply is abundant.

837. Do students of all nations resort to the university?—Yes; I was the only Englishman there, and I found every facility for study.

838. What, do you consider, is the number of subjects which a student, during the course of his surgical education, ought to dissect?—Eight or ten; and if I may judge from the Italian students, the number ought to be greater.

839. What is the number at the Italian schools?—Ten or a dozen, and sometimes more; the fact is, most students on the Continent perform all surgical operations, first upon the dead body, besides dissecting; and the supply being abundant, they can thus easily perform them.

840. You think they ought to have that facility?—Most assuredly, and I think that this is one of the advantages which the foreign students possess over the English; for the former, besides dissection, have ample opportunities of performing all kinds of operations upon the dead subject, almost as often as they please, by permission of the professor; in this country that is nearly impossible.

841. Is the practice of exhumation known in Italy or Germany?—I have not heard of such an evil.

842. Did you find any existing prejudice against dissection, either in Italy or Germany?—I am not aware of any.

843. Is there any supply in Germany from the executions of criminals?—I should think exceedingly limited; in proof of this I may mention an instance, which was told me of a person who had been executed at Berlin a few years before I went there, and it was mentioned as an event in the history of that capital. There were no executions all the time I remained in Germany; I believe they are exceedingly rare in that country.

844. What can you state with regard to the feelings of the English public as to dissection?—I think the English public have less objection to dissection now, particularly regarding the opening of bodies after death, than they had when I commenced my professional studies about twenty years ago; as to dissection by teachers, I cannot speak; I allude to the examination of bodies after death.

845. Do you know the practice in the dissecting schools of any of the large provincial towns in France?—I have been at Montpellier, not studying, only passing through; on inquiry, I have understood that the supply of subjects, for the dissecting room there, is obtained a good deal from Lyons; Montpellier being a small town, and not very populous, it is not sufficient for the anatomical school; therefore, I have been informed that Lyons supplies it in part, as also Marseilles.

846. Have you any thing further to say to the Committee, or do you wish to state your views regarding the mode of supplying the anatomical schools in this country with subjects?—Regarding the mode of supplying the schools,—1st. I think repealing the law that makes it part of the punishment for murder, would be a material step towards it; 2dly. Repealing the law that makes it a misdemeanor, if a member of the Colleges of Physicians or Surgeons, or of the Company of Apothecaries, has a subject for the purpose of dissection in his possession; 3dly. I am of opinion that the bodies of all those that die in workhouses, hospitals, or other eleemosynary institutions, which are unclaimed, and who have been supported by or would be buried at the public expense, ought to be given up for dissection, the remains receiving christian burial afterwards.

847. Would you have that law, as to the latter part, compulsory or permissive?—I think it would be necessary to have some efficient board or officer to manage the distribution of the bodies obtained from those institutions to the different anatomical theatres; and I should think, if the supply was sufficient, that it would not be required to be compulsory.

848. Would you not think it prudent, in the first instance, to render a change of system more agreeable to the feelings of the public, to have it only permissive?—Yes, I should object to any thing compulsory in the first instance, and I should always wish to respect the feelings of the public.

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*Lunæ, 5^o die Maij, 1828.**David Gale Arnott, Esquire, called in ; and Examined.**D. G. Arnott,
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1828.*849. YOU are surgeon to the hospital-ship *Grampus*?—I am.

850. Will you state to the Committee what is the average number of patients who receive relief on board that ship daily?—I think 125.

851. What is the average number of patients yearly?—Eighteen thousand five hundred and fourteen in the year 1826.

852. What is the average number of the deaths of the patients received on board that ship?—I have taken 128 as the average in the same year.

853. Do the persons who receive relief consist principally of natives or of foreigners?—Of both ; of seamen of all nations.

854. Are you in the practice on board that vessel of opening the bodies after death?—Yes, whenever we wish to do so.

855. Is any large proportion of those who die claimed by friends or relatives?—One-sixth is claimed.

856. Do the patients seem aware that in case of their death they will be subject to surgical examination?—I believe so.

857. Did you ever hear them express any anxiety upon the subject of their bodies being opened after death?—I think sailors have a great superstitious dread of being opened.

858. Did you ever hear the patients on board the *Grampus* express any great anxiety of being opened in case they should die?—I do not think I ever did.

859. Is it well known to them that they will be opened?—I have no doubt of it ; not the least.

860. Are you in the habit merely of opening the bodies, to discover the cause of their decease, or are you in the habit of dissecting them?—Only of examining the morbid parts, certainly.

861. Do you conceive there would be any great objection to giving up the bodies, either before or after examination, for the use of the dissecting schools in London?—I would object to have them given up previous to my examining them, and it would remain after that with the committee of governors, and not with me at all.

862. You who have witnessed the different stages of their complaints, would be desirous of examining the body, for knowing more perfectly what the nature of their complaint has been?—I am only desirous of examining bodies when there has been any degree of obscurity in the disease.

863. Then do you, in fact, examine all, or only part of the bodies?—A very small proportion.

864. As far as your own opinion goes, subject of course to the discretion of the governors, do you think there would be any great objection to giving up the bodies of patients, unclaimed by friends or relations, for the use of the dissecting schools of London?—I could only answer for myself, that I should have no objection ; I should be very desirous of it ; indeed, I should think the committee of governors would be anxious to promote any thing that would be conducive to science.

865. And from that source not less than one hundred bodies annually might be obtained for the use of the school?—Yes, including those I have named ; I may add, one-third of those who died in the year 1826 were persons who had no relations or connections ; I may say, that five-sixths were consequently buried at the expense of the charity in 1826 ; I have taken that as the average.

866. Do you conceive that the giving up the bodies of those that are unclaimed, would act prejudicially to the purposes of the charity ; that it would deter sailors from having recourse to that hospital for relief?—In the first instance I think it would ; but the patients we frequently receive (which accounts for the great proportion of the deaths) are in the last stage of disease ; they have been four, five, and six months on board ships without medical attendance, and they frequently die soon after they come into the hospital.

867. Are they sailors principally of merchant-ships?—They are sailors of merchant-ships, and sailors who have met with accidents in the river Thames ; and we have also a proportion from the navy.

868. Are those who die, buried at the expense of the charity?—About five-sixths of them are.

869. Do you think, if it was known that they would be dissected, that there

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would not be a greater disposition on the part of their friends to claim them?— I think there would; I did not reply to the former question as to the prejudices they would have; I think the sailors are the most superstitious men upon the earth or upon the waters, and they would be full of prejudices upon the subject.

870. That would make a difference in your calculations?—I should think it would.

871. Do you think, if the penal law which gives the bodies of murderers for dissection, were repealed, it would have any effect in removing the repugnance of the sailors to dissection?—My opinion is, that it would overcome all prejudices.

872. Then you refer the existing repugnance very much to giving up the bodies of murderers?—Very much; half of the persons who died on board the *Grampus* in 1826, were foreigners.

Sir Henry Halford, M. D. called in; and Examined.

Sir
H. Halford, M. D.

Appendix, N° 15.

873 I BELIEVE you are president of the Royal College of Physicians?—I am.

874. Having delivered in a Return of the physicians and licentiates of the Royal College of Physicians, admitted in 1827, do you think that the number contained in that return, viz. sixteen, may be taken as a fair average of the number usually admitted in the course of a year?—I think it is the fair average number.

875. Will you state to the Committee whether the candidates for fellowships, or the candidates for admittance to practise as licentiates, are required to have gone through a course of anatomical dissection?—Certainly.

876. Will you state whether they are required simply to have attended lectures on anatomy, or whether they are required to have themselves dissected?—We demand a knowledge of Anatomy of them; I think they could not have acquired the knowledge we expect of them, without having dissected themselves.

877. The nature of the examination is so strict, that you think they would be unable to pass, unless they had themselves dissected?—I think so.

878. Do you concur with the late Dr. Baillie (whose opinion is found recorded in his posthumous works) that it is of the utmost importance to the medical as well as the surgical practitioner, to have acquired a certain and ready knowledge of human Anatomy, by having actually dissected?—I think it is impossible to practise physic rationally, without such knowledge as is acquired by dissection itself.

879. The object of the Committee being to discover, if possible, some other mode of obtaining a supply of subjects for the schools than that of exhumation, can you offer to the Committee any suggestions on the subject?—I do believe that they may be procured in sufficient numbers without exhumation, but I believe it will require the interposition of the government. I do not think it a fit subject for legislation I own, except the removal of some statutes which may be an impediment in the way of it; but I think it possible to do that through the medium of the Secretary of State.

880. Are you aware of the opinion given lately by a judge at Lancaster, that no bodies were legally liable to dissection, but those of murderers?—I take it for granted from that, that there may be some law which makes it a misdemeanor; and if that be the case, I should hold it to be essential that that law should be repealed.

881. Are you aware of two surgical students having been found guilty of a misdemeanor, for having taken into their possession a body, with intent to dissect it, knowing the same to have been disinterred?—I am not aware of the particulars of that case, but I have heard something said loosely upon the subject.

882. Admitting that verdict to have been correctly given, is there any professor or any student in any dissecting school in London, who would not be indictable for a misdemeanor?—Certainly not; all would be liable.

883. Then if that be the state of the law, in what way do you think the Secretary of State, without an alteration of the law, can remove the present difficulties?—It strikes me that it would be possible to have such a communication with magistrates and those who superintend poor houses, that it could be done.

884. Are you aware of a trial which took place about 40 years ago (*Rex versus Young*) in which the master of a workhouse, a surgeon and another person, were indicted for a conspiracy, to prevent the burial of a person who had died in the workhouse?—I was not aware of that; but I was prepared to have stated, that it was possible to have the burial service first of all performed, which would take away much of the difficulty. If they were not claimed in a day or two after the burial service had been read, a hint might be given to the surgeon.

885. Would not such a state of the law as now exists, render it unsafe for a parish officer

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officer to give up for dissection the unclaimed bodies of the workhouse?—I dread any legislative interference, any positive enactment.

886. Would it not be necessary to alter so much of the law as renders a person yielding up, and a person receiving bodies from the parish workhouse, for the purpose of dissection, liable to an indictment for a misdemeanor?—I think it highly proper that that law should be repealed.

887. Then as far as an alteration in the law should make it permissive to surgeons to receive, and to parish officers to give up the body, you would not object to an alteration in the law?—No.

888. Do you think the repeal of the law which now gives up the bodies of murderers for dissection, would tend to remove the dislike of the public to dissection?—Not immediately; I do not think it could be forgotten in less than 50 years, that dissection used to be the punishment of murderers, and therefore there would be a prejudice still.

889. Is the present feeling very much connected with the penalty under that law?—I think so; and I think the repeal of that law would not be operative for the purposes in the contemplation of the Committee, for a considerable time.

890. But nevertheless, though its operation would be slow, have you any doubt that the repeal would tend ultimately to mitigate the feelings of the public on this subject?—I certainly think, while that law remains, they will connect the crime of murder with the practice of dissection; an order to be dissected, and a permission to be dissected, seems to be too slight a distinction.

891. Do you think there is a disposition in the higher classes to permit an examination to take place, when it is necessary?—I think, in my own experience, there is much less objection among the higher orders now, than there was formerly. It is a much less difficult matter now to obtain permission to examine a body.

892. You would not object to make an application for that purpose in any case?—No; I should not think it would hurt the relations feelings so far as to deter me from asking.

893. Would it not be better that bodies dying in health, should be obtained for dissection?—It might be advantageous, for the sake of comparison with diseased bodies.

894. But the proportion of those who die in health, and can be obtained for dissection, except in a case of very frightful accident, affecting the lives of many, would at all times be small?—Certainly.

895. Will you state, whether you do not consider a knowledge of Anatomy by dissection, very important to be acquired, as well by the general practitioners, commonly called apothecaries, as by surgeons and physicians?—It would be absolutely necessary to the general practitioners; I do not say that it is indispensable in a man who is to make up medicines merely.

896. But inasmuch as the duty of an apothecary in the country, is not merely to make up medicines, but to perform the part which a surgeon or physician performs in London, do you not think the circumstance of his having dissected, highly important for his performing his duty well?—No man can administer rationally to internal diseases or to external injury, without some knowledge of Anatomy.

897. Do you not think the interests of the humbler classes are even more concerned than those of the upper classes, in the more general diffusion of anatomical science?—I should say they were, inasmuch as the humbler classes are more numerous.

898. You said you thought one of the means of obtaining a supply of subjects, with as little violation as possible to public decency and the feelings, would be to perform the burial service on bodies unclaimed, and afterwards to allow the surgeon privately to remove them?—I think, that after the burial service had been read over the body, if no relations or friends claimed it, then a hint might be given by the overseer to the anatomist or surgeon, that he might have the body to examine it as to the disease of which it had died.

899. Do you not think it would be practicable to enforce the performance of an engagement to be entered into on the part of the dissector, binding him to give funeral rites and decent burial to the remains after dissection?—Yes, I think that as great importance is attached to the ceremony of burial, it would as much tend to mitigate the prejudices against dissection, if you were to obtain that security.

900. If the law authorized the dissection of persons executed for other crimes than murder, do you think that would greatly increase the present feeling against dissection?—I should object very much to make no distinction between persons

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who had offended against human nature to the utmost extremity, and common crimes.

901. Do you think it would increase the feeling against dissection, or lessen it?—I think it would increase the feeling against dissection, by associating it with crime of any kind.

902. But you would rather dissection was not made a penal enactment?—Yes.

903. It being upon evidence, that with few exceptions, those who now supply the dissecting schools with subjects are thieves, do you think it reasonable to expect that a magistrate or secretary of state, out of tenderness for the teachers and students of Anatomy, should be lax in endeavouring to detect and punish this class of offenders?—I should think they ought not to be tolerated at all if possible, and for the reason I will now present to your minds: when there is a difficulty in obtaining bodies, and their value is so great, you absolutely throw a temptation in the way of these men to commit murder for the purpose of selling the bodies of their victims.

904. Then you are of opinion, if it were possible by any other means than exhumation, to obtain a supply of bodies, that it would be desirable to do away with that practice?—Most certainly.

Thomas Rose, Esq. called in; and Examined.

*Thomas Rose,
Esq.*

905. YOU are surgeon to St. George's Hospital and to the St. James's Parochial Infirmary?—Yes, I am.

906. Will you state to the Committee, as the result of your experience, in what light the poor regard the practice of dissection?—In regard to the practice of dissection, that is, the giving up the bodies entirely, I have no means of judging, but I should think the feeling is certainly against it. There is, however, a most extraordinary indifference in the poor about what does not immediately and personally concern themselves, however much it may affect those in a situation similar to their own; in the last few years, too, there has been a very marked diminution in the objections they were in the habit of evincing to the examinations of the bodies of their relatives. No difficulties are now thrown in the way of such examinations, which are made continually and almost openly; but I conceive there still is a very considerable prejudice in their minds against the giving up the bodies entirely.

907. As far as a partial examination goes, you think they are nearly indifferent?—I know that they are; they throw no obstruction in the way; they often inquire what has been the result of the examination, and they see us going to make it without the slightest objection.

908. Examinations in the establishment?—Yes.

909. Is there a dissecting establishment attached to St. George's Hospital?—There is not.

910. Can you state what is the number of poor who die either at the workhouse, the infirmary or any other establishment attached to the parish of St. James's?—In the workhouse there are between 170 and 180 deaths in the year.

911. Is the infirmary attached to that?—The infirmary forms a part of the building, and both are included under the same head.

912. Then from 170 to 180 die in all the eleemosynary establishments belonging to the parish?—That number of deaths occurs in the establishment which is called the workhouse of the parish with the infirmary joined to it.

913. Are there any who die out of the workhouse whom the parish are required to bury?—Yes, about 40 or 50 a year; they bring there the bodies of all poor persons when application is made, without reference to what they are; the mere fact of their having died in the parish is sufficient.

914. What proportion of this number of 50 and 170, making 220, are buried at the parish expense?—I understand that of the two numbers together upwards of 170 are buried at the parish expense.

915. Are the Committee to understand that this number of 170 are persons not claimed by their relatives?—No; a small proportion of them are not claimed by relatives, but the greater part are; those not claimed may be about 40 or 50.

916. Forty or fifty of those would be claimed if the relatives were rich enough?—I mean that there are not more than 40 or 50 unclaimed by their relatives; the greater part are claimed by their relatives, but those are too poor to afford the expense of the burial.

917. Is any objection made at the workhouse of St. James's, by the parish officers, the surgeon of the parish examining those who die?—None whatever; there were considerable

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considerable difficulties made some time ago, and then the prejudices of the poor were very great: from the moment that those difficulties were withdrawn, and the practice became more general, it was found that the prejudices in the minds of the poor began rapidly to decline. At the time when it was difficult to obtain permission to examine a body, the poor were in a state of excitement and alarm when such examination took place; but now we often see 50 or 60 Irishmen about the dead-house when an examination is going on, and they appear perfectly indifferent to it.

918. Then the difficulties made by the parish officers seem to have aggravated the prejudices of the poor against dissection?—Most decidedly.

919. What is the number of persons who claim relationship to those who die, but who do not pay the expense of the funeral?—I should think 130 or 140 of those who are buried at the parish expense have relatives who take an interest in what befalls their remains, though they are unable or unwilling to bear the expense of interring them.

920. What objections do you foresee to making it permissive for the parish officers to give up for dissection the bodies of those who die in workhouses and are unclaimed by any friends or relatives?—I am not aware of any, if proper measures were taken to compel those who were entrusted with such bodies for dissection, to inter them decently afterwards; provided this were done, I think there would be no objection.

921. A moderate security should be taken?—A security by paying down a moderate sum of money; I believe no objection would be made by those connected with these establishments, if such a regulation were made.

922. Do not you think it would be more convenient, if instead of authorizing specially parish officers to give away the bodies of the poor for dissection, the law was made permissive to all, without distinguishing any particular class of persons?—It appears to me, that in framing such a law, it would greatly forward the object in view, to refer particularly to our different public institutions, and that in such reference a distinction might be made between those which are supported by voluntary contributions and donations, and those which are supported by a forced rate; if the governors of the former could have the power to direct and authorize an examination, and nothing beyond that, to be made of the bodies of all who die in them, previous to their being given over to their relatives, a power which is already very generally assumed, I think those of the latter, of parish workhouses for instance, might have the absolute control over the bodies of all who die in them, and that as the relatives of the deceased had not chosen to contribute to their support whilst they were in life, they should have no right to interfere afterwards, except by the permission of those who had been compelled to afford that support.

923. But if the law gave authority to those persons legally, possessed of the body, the power of disposing of it, would it not be better than specifying that the parish officers should give up the bodies of the poor under their charge?—I would permit the next of kin to give up the body if they chose, but would consider the governors and directors of the poor as standing in the situation of next of kin to those persons whom they had been compelled to maintain up to the period of their death; I think such a regulation would be generally beneficial in its effects, as well as afford facilities for prosecuting anatomical studies.

924. You think that would not be placing the parish officers in an invidious situation?—It would certainly be giving them considerable power, invidious power perhaps; but those powers they never would be inclined, nor could they by any possibility venture to abuse; they must consult the feelings and even the prejudices of the poor respecting their deceased relatives, and if they gave any bodies for dissection, it would be those who had no relatives, and this only from seeing the necessity of anatomical science for the benefit of all ranks, and to put a stop to the horrid practice of exhumation.

925. You heard the questions put to Sir Henry Halford with respect to the dissection of murderers; do you think the doing it away would have a beneficial effect?—I think it would, as the law respecting the dissection of murderers increases the prejudice against anatomical investigations.

926. Do you think the science of Anatomy would be benefited by doing away with the dissection of murderers as a measure of punishment, and by permitting parish officers to give the bodies unclaimed by relatives for dissection?—I think these two measures would be very beneficial; as the performance of the funeral service before bodies were given up for dissection was recommended by Sir Henry Halford, the Committee will I hope allow me to state that such a proceeding would, in my opinion, excite too much attention in any public institution where the body

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was to be given up for dissection; when the remains were afterwards interred, the funeral service would of course be performed, as in all other instances.

927. Would you recommend that any money should be given by the parish officers to the relatives who were disposed to allow anatomical researches on the bodies of persons?—I think the parish officers would not be disposed to encourage such a traffic, or to negotiate with those who shewed such feelings.

928. The surgeons?—To that I see no objections; if the relatives were disposed to take money, they might afterwards, if they chose, see the funeral performed, when the time employed in dissection had elapsed.

929. Can you state the expense of the funeral of a person dying in the parish workhouse, including the burial fees of the clergyman and the other parish officers, and also the expense of the coffin; what it altogether costs the parish?—I have made inquiries, and understand it is altogether one pound.

930. Do you not think it would be right, in case the bodies of the unclaimed were given up to the surgeons, to subject the surgeons to the expenses of the burial?—Yes, and I think something beyond that, to cover any expense the parish officers might chuse to incur in satisfying themselves that the burial had been performed after dissection; perhaps double the expense of the funeral would be a fair sum; the surplus might form a fund for the relief of the sick, or for any charitable purpose in the parish.

931. Do you think the science of Anatomy would gain more by repealing the law which gives the bodies of murderers for dissection, than it would lose by the loss of bodies dying in a healthy state?—I think we should lose nothing by that; so many die from accidents in a healthy state, that abundant opportunities are afforded us of making ourselves acquainted with the appearance of the different organs and parts of the body when not impaired by disease; I suppose at least 500 opportunities are thus afforded us, by accidents, for one, by the law respecting murderers.

Peregrine Fernandez, Esquire, called in; and Examined.

P. Fernandez.
Esq.

932. ARE you surgeon to the united parishes of St. Andrew Holborn and St. George the Martyr?—Yes.

933. Can you state what is the number of persons who die yearly in the workhouses, infirmaries, or any similar establishments belonging to the united parishes?—I obtained a return for this Committee.

[The same was delivered in.]

934. Does that return contain the number of those that are unclaimed?—Yes.

935. Will you state whether at present any objection is made by the parish officers in these parishes to the examination, by the parish surgeon, of those who die in the workhouses?—When I became surgeon to this infirmary, they had not been in the habit of opening bodies, that is about eleven years ago; I opened almost every body that died, and some alarm was created. A standing order was passed at our Board, by which bodies were permitted to be examined, with the consent of two out of four of the overseers, and their friends. That is now ten years ago; we have had forty overseers during that time, and I never knew an overseer refuse his consent in any one instance.

936. Is much or any objection made by the poor themselves, or their relatives, to the examination of bodies after death?—I think three times out of four I obtain their consent (I am speaking under the mark); when the question is asked, I expect the consent of the friends that the body shall be opened. I have been frequently asked by the paupers to open their bodies after death.

937. If security were given, that the bodies of those unclaimed by their friends or relatives, should receive decent and christian burial, do you foresee any objection to the giving up the bodies of those unclaimed to the surgeons?—I see no objection myself; but I think it might startle them, if the law were imperative upon the overseers to give them up; it would create objections; but if the law only permitted them to do it, I think there would be none.

938. You do not think a permissive law would be objected to, in any great degree, either by parish officers or by the poor themselves?—I feel quite persuaded it would not, having had experience upon the subject; I will tell you why I think so; if I were to relate an instance, perhaps, it may be more satisfactory. In the course of last winter there was a question of infanticide, and the coroner did not get satisfactory

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factory evidence from the first medical person called in; he sent the body to me; I made the usual experiments, and afterwards I turned to the overseers and others, and said, "This body, at least, as the mother rejects it, and it belongs to no one else, there is no reason why I should not take it away for ulterior proceedings." They seemed rather to applaud than condemn what I proposed.

939. Then you think, if the alteration would tend to put a stop to the practice of exhumation, it would tend to remove the dislike to dissection?—Certainly; the poor are fond of having a "comfortable funeral;" and if it was known that they would not be disturbed, but they should be taken only according to the taste of the poor people, I have no doubt there would be no objection.

940. Have you any knowledge of the feeling of the Irish with respect to dissection?—I am afraid they are the least disposed to give facility to the study of Anatomy.

941. Do you know if they are allowed first to wake the body, whether their objections are considerable?—I have understood that has been suggested, but my impression is, that it would not lessen their objection to dissections.

942. Do you not think, if murderers were no longer given up, it would tend to efface or mitigate their objections to dissection?—Certainly; while it remains part of the punishment of murder, it must indispose any body to share part of the fate of a criminal.

943. Would it be advisable to give the relatives or persons who chose to permit these examinations, a sum of money to buy mourning, or for such other purposes as might be requisite?—I have no doubt it would be better to give them money. We have been offered to be allowed to open bodies, and to do what we liked with them, but I have refused for obvious reasons.

944. Do you think it would be better to have funeral rites after the examination?—It might remove an objection, but I think those who gave up the body would have that non-chalance that they would not care about it.

945. From your frequent intercourse with the poor, do you think that many of them would be disposed to part, before death, with their own bodies, or that their relatives would be disposed to part with many, in case it were made permissive to sell bodies?—I am not sure; I do not think that many would sell their own bodies, but I think, when once it was permitted, the custom on the part of relatives would grow.

946. Do you concur with Mr. Rose as to the expense to the parish of burying a pauper?—I do not know the precise expense, but I think the overseers would rather wish to save it.

Joshua Brookes, Esq. called in; and Examined.

947. YOU were lately a lecturer on Anatomy in Blenheim-street?—I was.

*Joshua Brookes,
Esq.*

948. Will you state to the Committee whether the difficulties of obtaining a supply of bodies have not of late been very much on the increase?—Extremely so, indeed; I have brought with me a document which I was requested by the Secretary of State, five years ago, to send to him. I was requested, through the medium of Sir Astley Cooper, to state the best mode by which I conceived bodies could be procured for dissection; it contains the whole of my opinion at this moment.

[The Paper alluded to was delivered in.]

Appendix,
N^o 16.

949. Will you state whether the difficulties which have occurred with respect to obtaining a supply of bodies for anatomical schools, have not fallen with greater hardship upon those that are connected with private schools for Anatomy: private, in contradistinction to the schools for Anatomy which are attached to some of the larger hospitals?—They fell very heavily upon me and other gentlemen; I do not think the resurrection men make any variation with regard to price; but when I was a student I paid but two guineas for a subject, and before I left off lecturing I paid on some occasions sixteen guineas. It is stated in that paper, that three subjects, for which I paid sixteen guineas each, were in the course of a few hours, or a few days, taken away again, in consequence (as I suspected), of a combination of part of the resurrection men informing against me. It was so notorious, that Glennon, a police officer in the Borough, had a silver staff about twenty inches long, with an inscription that it was given to him for obtaining a body from Mr. Brookes, as I understood. Probably this subject might have been an executed criminal, whose body was sent to an undertaker by the friends for private interment, as such an occurrence did take place, in the following manner; the under-

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taker placed the corpse in an out-house, and during the night the resurrection men came and carried it away, as it was afterwards proved, by the undertaker's connivance, for which he was tried and sentenced to two years imprisonment. The resurrection men subsequently brought the same subject to my theatre, for which I paid rather a large sum, how much I do not exactly recollect. The individual was very robust, and had been tattooed on the inside of one of the arms. An information was in consequence laid against me at the Police Office in Union-street, and a search warrant issued and delivered to Mr. Glennon, who, on entering the dissecting rooms, examined the arms, and thus very readily recognized the body. The tattooed part was somewhat remarkable, for which reason I had made an incision all around and through the skin for the purpose of removal, but by some accident forgot to do so.

950. Was that staff given by the parish officers?—Yes, I believe so; but possibly by the friends. I think in the course of a month, three unfortunate females, who had destroyed themselves by submersion, were brought to my house and taken away again in a few hours, possibly a day might have elapsed, by some of the resurrection men giving information, as I believe.

951. Is it not the practice of the teachers in the schools of Anatomy, to supply the subjects to their pupils at a given price?—Certainly, at a price as moderate as possible; if we paid four guineas, as I always injected the subjects, and therefore there was an extra expense incurred by that means; I never made a greater demand than two guineas for performing that process; but when I paid sixteen guineas I never charged my pupils more than eight guineas, and in consequence I lost considerably.

952. Is it not for that reason, viz. that persons at the head of private establishments, as well as those at the head of larger establishments, are obliged by custom to deliver the subjects to the pupils at a very moderate price, that the persons at the head of private establishments are unable to continue the practice of teaching?—No doubt they are losers; a very heavy expense was incurred by advertising and printing; I am sure I lost during the last twelve months of my teaching; and I am also pretty clear, but I will not positively affirm, I was out of pocket the year before that; I did not retire from teaching Anatomy in consequence of the loss, but in consequence of ill-health, being unable to do that justice to the pupils which they had heretofore experienced from me.

953. If at the great hospitals the lecturer receives twenty guineas from his pupil as the hospital fee, and the number of such pupils is large, is not such a teacher better able to afford the loss which attends the supply of each subject to his pupil, than a person who has no hospital fee to meet that expense?—I beg leave to correct a little misunderstanding under which the Committee seem to labour; when these gentlemen enter an hospital, they are not entitled to the attendance at the anatomical theatre annexed to the hospital, and therefore the fee they pay at any hospital is totally unconnected with any anatomical fee. There are many students who attend anatomical theatres who are not attached to hospitals; all pay alike, according to the class in which they attend; the fee paid for attending and dressing at the hospitals, is totally different from that paid for dissecting and attending the anatomical theatre.

954. Does not a large proportion of those pupils who enter themselves at the hospital for attending the hospital practice, also enter the dissecting establishment for the purpose of dissection?—Undoubtedly; the greater part I should suppose.

955. Then if in one branch of medical education there is a large gain to the teacher, and in the other there is a considerable loss, is not the teacher attached to that hospital better able to bear the loss upon the dissecting part of the establishment than a teacher at a private dissecting school?—Undoubtedly.

956. What is your opinion generally of resurrection men?—My opinion I shall give *vivâ voce*, but it is expressed in that paper in detail; they are the most iniquitous set of villains that ever lived.

957. Is there any thing that is not contained in that written statement which you now wish to state to the Committee?—Nothing further, than in answer to that question I should state, my premises would have been laid waste, and I suppose I should have been immolated, but for my contiguity to the police office; Sir Robert Baker came forward with his police establishment, by which means I was protected; but there is a person now waiting outside this apartment, belonging to a party which heretofore has brought a mob about my house; and upon one occasion one of those persons came clandestinely into my dissecting room and cut a subject to pieces that I had

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I had paid eight guineas for the night before ; you would scarcely believe, that upon an application for five guineas at the commencement of each anatomical season, a *douceur* which I refused to give them, they came at dusk in the evening with two subjects, in a high state of decomposition, in a little chaise cart ; one of these subjects they dropped at the Poland-street end of Marlborough-street, another they dropped at the end of Blenheim-street, and then they went away through Argyle-street or Carnaby-street ; and shortly after, two young ladies, nicely dressed, stumbled over one of these horrible subjects, which raised such a commotion, that as I before stated, had it not been for the prompt assistance of Sir Robert Baker and the police establishment, I might have been sacrificed to popular fury.

958. That was solely to raise a prejudice against you ?—Yes ; to which I may adduce the following narration, viz. on a similar demand being made at another time by two resurrection men, and compliance refused, they said, in the presence of two students, whilst waiting in my hall for the answer, that if I did not send out the money (I being then engaged in the dissecting rooms) “ that they would come in the evening and raise such a mob, which would not disperse until they had pulled the house down, without leaving one brick standing upon another ;” this threat being subsequently made known, I requested the same gentlemen to accompany me to the police office in Great Marlborough-street, where the deposition being taken on oath, the magistrate issued a warrant, which was given to Mr. Plank the head officer, to execute against the aggressors, who were in consequence incarcerated for a certain period. Should I be permitted further to add to the above related facts, I might state the following atrocity committed by resurrection men : A young lady having been afflicted with the tooth ache, had the carious tooth extracted ; but subsequently a disease arose in the lower jaw from whence the tooth had been removed ; the whole of the lower jaw became enlarged, and continued increasing in magnitude for several years, until at length she seemed to have, as it were, a double head formed by an immense secretion of osseous and cartilaginous substance, the rictus of the mouth intervening. In this state I saw her about three months previous to her death ; and after that catastrophe occurred, the cemetery and grave being pointed out to one of the resurrection men, a party went in the course of a few nights and disinterred the body, which they decapitated, bringing away the head only, but leaving the bleeding corpse exposed on the ground, the coffin lid and shroud being also left in different places, forming with the empty coffin, a horrible exhibition to public gaze. The churchyard being at no great distance from the residence of the defunct, a dreadful clamour was soon raised in consequence ; having been first excited by some labourers going to work early in the morning, and seeing the shocking spectacle that thus presented itself ; the burial place being only separated from the road by a low fence, and of course the whole inhabitants of the populous village and its vicinity were thrown into a state of outrageous commotion by this iniquitous and unfeeling proceeding of the depredators. The churchwardens and overseers met as early as possible, and offered a reward of 10 guineas for the apprehension of the delinquents, who however escaped with impunity.

959. You consider it then highly desirable, if possible, to obtain a supply of subjects by any other method than that of exhumation ?—Yes, and by any other method than that of employing resurrection men.

Granville Sharp Pattison, Esq. again called in ; and Examined.

960. DURING your residence at Glasgow, was it the practice of the pupils to obtain subjects by going out themselves into the burial grounds, and exhuming them ?—It was the young gentlemen of the private parties of the anatomical teachers who exhumed the bodies.

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961. Did it ever happen while you were at Glasgow, that the bodies of any murderers who were executed, were given up for dissection ?—It did ; but the effect produced by the giving up of those bodies was to increase the difficulties and the prejudices existing against dissection.

962. Did it ever occur, that upon the occasion of the servants of the professor going to receive the body, they were forcibly driven away by the people, and compelled to relinquish it ?—I am not aware they were ever compelled to relinquish the body, but invariably if the body was taken from the place of execution to the class room of the teacher, it was followed by a mob, and the individuals who carried it off, were pelted with stones.

963. What was the price of a subject at Glasgow during your residence there ?—

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They were not to be procured for money; they were got, as I before mentioned, by the young gentlemen of the private parties, and the privilege of the young gentlemen who got them, was the liberty of dissection; the only individuals who could obtain subjects for dissection in Glasgow, were those who exhumed them.

964. Did it ever happen during your residence there, that any of these young men were detected in exhuming the body?—In my own case, the first year I lectured, they were not detected in the fact; but there was a body found in the dissecting room, which was supposed to have been the body of a person exhumed, and these individuals were indicted with myself, and tried before the circuit court in Edinburgh, and although acquitted by the jury, the expenses of the trial cost me 520 £ sterling.

965. Is it to any particular circumstance that you attribute the extraordinary degree of dislike to dissection which exists in Scotland?—I think that not only in Scotland, but all over the country, the dislike arises in part from exhumation, in part from its being a part of the penal law that the bodies of murderers should be dissected, and in part from the great mystery that is thrown about dissection; there is a very strong fact which, perhaps, it may be important for the Committee to know, as it proves, when the public comes to know the nature of dissection, the prejudice which exists against it is removed; Mr. Crompton, the surgeon general of Ireland, mentioned to me that when he began to teach Anatomy, he built a small dissecting room; and as the thing was known to all the persons employed in the neighbourhood, he thought the best way to carry on his anatomical pursuits was to leave the door open, that the public might come in and look at his dissections and attend his lectures; and the consequence was, that a great number of porters and ostlers, and the poorer people came in to his lectures; and after they were finished, he took the opportunity of pointing out to them the structure of the body, and the importance of this being known, &c.; the effect produced was, that the whole lower orders around became so interested and so favourably disposed to dissection, that they brought him bodies themselves; and I think, in nine instances of bodies of individuals who had been exhumed, the relations who discovered it, came with the greatest calmness, and said they believed he had the body of a wife or child, but they did not wish to make any disturbance; they came and saw the body, and had it removed without the slightest commotion.

966. You are of opinion, therefore, that the laying before the public the real state of the case, and public discussions upon this subject, will in no way tend to injure the case of the surgeons in the mind of the public?—I am quite satisfied it will not; I can speak from my own experience in teaching Anatomy popularly, which I have done to a general audience; that I have found the prejudice which existed in the minds of the lower orders, was at once removed; that they were not aware what dissection was, till they saw it performed; and when they saw it performed, they no longer looked upon it with the detestation which before existed.

967. Do you speak of your experience in Glasgow, or in the United States?—I am speaking of my experience at Glasgow and in the United States; for I have taught Anatomy popularly in both countries.

968. Is there any other matter connected with the inquiries of the Committee which you wish to state to them?—I am not aware of any thing; if my opinion were asked as to the best plan for procuring bodies, I should say I agreed with the mode which has been recommended by most of the gentlemen who have been examined; I conceive that all the difficulties which at present exist against dissection would be removed, if the law which at present renders it penal or criminal to have any body but the body of a murderer, were repealed, and bodies were allowed to become property, that they might be disposed of by their relatives, or in case of strangers, might be disposed of by the parish officers. There has been a difficulty suggested in conversation with some of my friends as to the manner in which these bodies could be disposed of; but I conceive it would be only necessary for the teachers of Anatomy in every town to associate, and give security in the first instance that all the bodies taken to a particular place, either to a school of anatomy or some hospital, should be received, and a certain sum paid for them; and being received there, they should be disposed of to the different teachers of Anatomy, in proportion to the number of students attending their lectures; I have no doubt if this was done, all the difficulties which anatomists at present experience, would be removed in a few years.

969. Would you have the funeral rites performed?—I would have security given that after the body has been dissected, the funeral rites should be performed.

970. You regard the repeal of the law concerning the bodies of murderers as one of

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of the essential measures for effecting a change in the public mind?—Certainly; there is nothing in which the poor are so much interested as allowing students of medicine a liberal supply of dead bodies; in America, where dissecting is permitted, I have no hesitation in saying that the general mass of practitioners are much better educated, and much better qualified to perform the duties of their profession than they are in this country; you find there men, in every little village, performing the capital operations of surgery, and performing them very ably indeed.

971. So that the poor are very greatly benefited by that extension of knowledge, which you attribute to the facilities they receive in practising dissection?—Yes; I am satisfied that in Scotland it is impossible for a person to obtain a correct knowledge of the structure of the human body.

972. In America, have the surgeons of whom you speak, had an opportunity of performing on the dead body the principal operations of surgery?—Always; in Glasgow, at present, bodies are so scarce, that they are salted in the summer, and hung up and dried like Yarmouth herrings, and the next winter they are put into water, and when putrefaction commences, the parts are exposed; and it is expected that a man is to acquire all the knowledge necessary for the practice of his profession, from such exhibitions.

973. Then if an accident happens to a man in that country, the practitioners would be unable to afford him that relief which they would in a country where dissection is permitted?—Certainly; and I attribute the superiority of that class of practitioners in America to the opportunities they have for dissection.

Dr. Southwood Smith, called in; and Examined.

974. YOU are lecturer on physiology at the Webb-street School in the Borough?—Yes.

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Southwood Smith.

975. Being author of an Essay, intituled "The Use of the Dead to the Living," and having attentively considered the subject which the Committee is appointed to inquire into, do you wish to state any thing for the information of the Committee?—I wish to state to the Committee the strong impression upon my mind of the danger of an opinion which I have heard expressed, namely, that dissection is not necessary to the general practitioner, who occupies the lowest rank in the profession, and to the physician who occupies the highest. The Apothecaries Company does not require testimonials of dissection; no college of physicians in Britain, as far as I know, requires any testimonial that the candidates who come before them have dissected; they require that they should have attended lectures on Anatomy, but I am not aware that they require that they should have actually dissected. Now that knowledge of Anatomy which is essential to every practitioner, can be acquired only by dissection. I feel that no language at my command can adequately express my conviction of this truth. To every practitioner, the lowest as well as the highest, there must sometimes occur cases in which his power to save life depends, I must repeat, on that knowledge of Anatomy which dissection alone can give. I have myself known many painful, and some fatal consequences, resulting from the want of this knowledge. My attention was first awakened to this subject, and I was induced to endeavour to direct the public attention to it, in consequence of my having met in practice with more than one fatal event, from the ignorance of Anatomy on the part of the practitioner.

976. Will you state what you consider an adequate number of subjects, for a student in Anatomy, who intends to practise surgery, to have dissected?—I should be guided rather by the opinion of the Anatomists, whom I number among my friends, than by my own experience; but as far as I can judge from their testimony, I should say not less than three.

977. Three in the whole course of his studies?—No; three in a year.

978. Then how many in the whole course of his anatomical studies?—I should think nine or ten.

979. Do you not consider that for the student in surgery the number should not only be adequate to teach him the structure and functions of the healthy body, but also fully adequate to enable him to perform upon the dead body those leading operations which he may be required to perform on the living?—Certainly.

980. If security were given by the surgeon that bodies after dissection should receive decent funeral rites and interment, do you see any objection to the bodies of those who die in workhouses and parish infirmaries, and are unclaimed by relatives, being given up for dissection?—I see none whatever; on the contrary it appears to me,

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from the best attention I have been able to pay to the subject, that that is the proper remedy for the great evils which prevail at present; I think it the proper remedy, because it appears to me to be perfectly simple in itself and quite adequate.

981. Do you think that the dislike of the public to dissection is at all aggravated by the bodies of murderers being given up for dissection?—I feel quite certain that it is very much aggravated.

982. And if it were proposed to extend it to the bodies of other criminals, you think the public feeling would be rendered still more inveterate against dissection?—I think it would: at the same time it has occurred to me, that it might be worth while to ascertain officially the number of convicts which die annually throughout the kingdom, because there would not be the same objection to appropriate to dissection the bodies of those who die a natural death in the prisons and the hulks. Even this however might operate unfavourably on the public mind, by continuing to associate the ideas of disgrace and crime with dissection. It is therefore a measure which I would not recommend, unless it should appear that the supply from these sources would be very considerable, and that an adequate supply could be obtained by no better mode.

983. Do you wish to add in any point to your evidence?—There is one point which I wish to say a word about; I think we cannot pay too much deference to the feelings of the poor, indeed of all classes; but from what I have observed, I should infer that these feelings are neither so strong nor so difficult to be removed as is commonly imagined: I form this opinion from what I have observed in the analogous case of inspecting the body after death. When I first began to practise in London, I became attached to one of the principal dispensaries; often there was a very great objection in the minds of the friends of those who died, to allow an examination after death; but I found that by reasoning with the poor, and explaining to them the importance of such inspection, I could generally succeed in obtaining their consent; ultimately I found very little difficulty, and it was always greatly lessened by allowing the friends to be present. I observed that they attended to what was going on with great calmness and interest; I recollect no instance of a relative or friend having been present at such an examination, who did not become convinced by it of its usefulness and importance; and in very many instances I went away, receiving the warmest thanks of the people for what I had done. I may state that the same result has been obtained at the London Fever Hospital; I am one of the physicians to the London Fever Hospital; in that institution a considerable number of persons die annually; it had been the rule never to examine any one there without the consent of friends; we hardly ever meet with any difficulty, and when any objection does exist, it can generally be removed by reasoning the matter with the friends that come to claim the dead. The Irish, of whom there is always a great number in the hospital, must be excepted. We have hitherto not been able to make any impression upon them; latterly, however, we have examined the bodies of all the Irish that have died, without consent; there was some clamour at first; it is now a good deal subsided; and I wish particularly to direct the attention of the Committee to the fact, that although it is now known to these people that the body is invariably examined after death, it has not had the least effect in deterring them from entering the hospital.

984. Are the Committee to collect from your answer, that you think a mistake is made in behaving towards the public with secrecy and mystery upon this subject; and that you think much may be done by taking proper pains and precaution, and by reasoning with them on the use of dissection?—I think so; I think, in the state of mind at present prevailing in the British public, the poorer classes are as much open to conviction as those above them, and perhaps more so; that they are quite able to perceive the reasonableness of the measure if it were properly represented; and that their feeling is so good, that they would ultimately acquiesce in it.

985. Do you think the strongest feeling against dissection is to be found in the poorer, the middle, or the richer classes?—I think the strongest feeling is in the middle classes; at least it has happened to me, that I have had the greatest difficulty in examining bodies after death in the lower part of the middle scale, than in the richer or poorer classes.

986. Are not the middle and the poorer classes those chiefly interested in rendering a good surgical education cheap, and easily to be obtained?—Certainly; because the rich can always procure the best assistance.

987. When dissections take place in a school, is the examination conducted with decorum,

decorum, and is all indelicacy and levity discountenanced amongst the students?—In general I think it is, very much so; and I think more so than it was.

988. What portion of anatomical knowledge do you think it would be desirable for a general practitioner or apothecary in the country to possess?—I think he should be minutely acquainted with the situation and connexions of all the important organs; that he should be so far acquainted with their structure, as to be able to distinguish the healthy from the diseased structure; and that he should be acquainted with the situation and relations of all the different vessels. Thus much at least is indispensable to the salvation of life, in cases which must often come before him.

989. Is not the general practitioner in the country daily liable to be called upon to perform on a sudden the most difficult operations in surgery?—Certainly.

990. Then you would say also, it is not only desirable that he should know the structure of the human body, but that he should be capable of performing operations of surgery?—If he be not so, the loss of life must often be the consequence.

991. What degree of anatomical study is necessary to give that degree of knowledge, namely, not only an acquaintance with the structure of the human body, but the skill to perform surgical operations?—I should think that it would be requisite that every practitioner, every one who is allowed to practise, should perform at the very least one half of the dissections which I have before stated to be desirable.

992. The ignorance of practitioners produces unnecessary sufferings and death?—In many more cases than is commonly understood, it is the occasion of protracted suffering and loss of life.

993. Are you of opinion, in point of fact, that if a facility of supply could be obtained, the degree of science in the lower order of practitioners would be very much increased?—I think it would be very materially increased.

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John Watson, Esq. called in; and Examined.

994. ARE you Secretary to the Court of Examiners of the Society of Apothecaries?—Yes.

995. The Committee understand that the Apothecaries Company are desirous to give some explanation, why it is that they do not require the persons who pass examination, actually to have dissected?—Yes.

996. Will you give that explanation?—Yes; by an Act of Parliament passed in the 53d Geo. 3. all persons who set themselves down in practice as apothecaries, or as general practitioners, throughout the kingdom, are required to pass an examination at the Court of Examiners of the Apothecaries Company, and no person can practise, without having previously been examined there: the Court of Examiners were therefore desirous not to throw any obstruction in the way of persons about to be examined before that court, because, by the law of the land, as it at present stands, dissections cannot legally take place; so that the court do not require persons to subject themselves to the penalties of a misdemeanor, in order to comply with the provisions of this Act of Parliament.

997. Since when have the Apothecaries Company been aware that the dissection of a body, not being that of a murderer, was a misdemeanor?—They have always had the idea that they could not legally call upon persons to do that; and in the outset of the present system they were not aware whether they could examine persons in Anatomy.

998. Then the Committee are to understand, from your explanation, that if the legal impediments to dissection were removed, the Apothecaries Company would require, as a part of the qualification of the candidates for a diploma, that they should actually have dissected?—I have no doubt the Court of Examiners would require such a thing to be done.

999. Do you wish to deliver in any paper upon the subject?—This paper, which is signed by the Chairman of the Court of Examiners, I am desired to deliver in.

[The Paper referred to was delivered in by the Witness, and read by the Chairman, as follows:]

The Regulations of the Court of Examiners of the Society of Apothecaries having been, by order of the Anatomical Committee of the Honourable House of Commons,

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Dr.
Southwood Smith.

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*John Watson,
Esq.*

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laid before them, the Court is desirous to explain the reason why those regulations do not require certificates of dissection, as well as lectures on Anatomy.

By the 14th section of the Apothecaries Act, the Court are authorized and required to examine all persons intending to practise as apothecaries, "for the purpose of ascertaining their skill and abilities in the science and practice of medicine, and their fitness and qualification to practise as apothecaries."

In the discharge of this duty the Court have deemed it incumbent upon them to require a knowledge of Anatomy as necessary to the science and practice of medicine; and they are fully aware how important dissection is to the attainment of anatomical knowledge; but they have not expressly required testimonials of dissection, because, as no person can practise as an apothecary without obtaining a certificate from the Court, it appeared improper to demand of candidates, as a qualification for such certificate, the performance of an act, which, under the existing difficulty of procuring subjects, would often be impracticable, and which, if practicable, might, as the law now stands, render the party liable to the penalties of a misdemeanor.

The Court of Examiners are therefore desirous that the difficulties and dangers which at present impede the study of Anatomy should be removed, because it is their opinion, that without a knowledge of Anatomy, medical students cannot obtain that "skill and ability in the science and practice of medicine," and that "fitness and qualification to practise as apothecaries," which the Act of Parliament requires.

(signed) J. P. Fallofield, Chairman of the Court of Examiners.

Apothecaries Hall, May 10th, 1828.

For further
Evidence of
Mr. Watson,
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1000. Is there any farther explanation you wish to give?—There is only one point which I wished to explain; that is, what is required of an apothecary by this Act of Parliament, that he should be skilled in the science and practice of medicine; and it is upon that point that the Court of Examiners have laid down their course of examination, and the course of study for the candidates who come before them.

Benjamin Harrison, Esq. called in; and Examined.

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PREVIOUS to his examination, the witness submitted, that in his peculiar situation, he ought not to be examined by the Committee; being informed by the Chairman, that he would be allowed to state his objections to any question at the time of its being put, he delivered in the following paper, as an order issued at Guy's Hospital, on or about Friday, May 9th, 1828.

"Hitherto, however minute may have been the inspection and examination of persons after death at Guy's Hospital, it has been so conducted as not to have produced any inconvenience or unpleasant feelings on the part of the patients or the public, but publicity and misrepresentation will, of necessity, occasion so much excitement, that it is deemed expedient to direct that no such examinations shall, in future, be permitted."

1001. You are the treasurer of Guy's Hospital?—Yes.

1002. Will you state to the Committee, what it was that occasioned the governors to issue that order on Friday, May 9th?—It was not issued by the governors; it was issued by the treasurer.

1003. By yourself?—Yes.

1004. What was it that occasioned you particularly, on Friday, May 9th, to issue that order?—I think it is described in the order itself. It states, that publicity occasioned by circumstances being known, and particulars relating to the hospital, which have been brought before this Committee.

1005. Was it particularly represented to the treasurer by the surgeons and lecturers, or any other persons connected with the hospital, that there did exist, particularly at this time, much excitement on the part of the public?—It was from the publicity given to these proceedings, and from the evidence that has been given.

1006. The Committee probably need not ask you, who have been so long the treasurer of Guy's Hospital, and a very influential officer there, whether you think it of importance to the public, and to the education of medical and surgical men, that dissections should be carried on?—I think it highly important.

1007. The Committee understand that it was with such feelings, the governors, not very long since, attached to the building of Guy's Hospital, a new dissecting school?—It was not erected at the expense of the hospital.

1008. At whose expense was it erected?—It has been paid for in part, and is intended to be wholly so, out of the profits of the surgical school.

1009. Do you mean, that a certain portion was taken out of the fees usually received by the physicians and surgeons, to raise that fund?—It was paid out of the surgeons pupil fund.

1010. How long ago is it since the new dissecting room at Guy's Hospital was built?—It was first occupied in October 1825.

1011. Do

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1011. Do the lecturers who now lecture at Guy's Hospital, receive the same portion of the fees as they did before the new dissecting room was built?—There were then no anatomical or surgical lectures, and now those receipts all go into one fund, subject to the deductions which the governors may, from time to time, deem expedient.

1012. Was there any dissecting room at Guy's Hospital, before the new dissecting room was built?—There was an inspection room.

1013. Did dissections go on in the inspection room?—By special permission.

1014. Were lectures given by the lecturers upon the bodies examined in the inspection room?—No.

1015. Was there a connexion between Guy's and St. Thomas's Hospitals, which occasioned Saint Thomas's to be the place where lectures were given on dissection?—The anatomical and surgical lectures were, previous to the erection of the new buildings, given at Saint Thomas's Hospital.

1016. Were lectures, with or without dissection, given at Guy's Hospital, with or without permission of the governors, previous to the erection of the new dissecting room?—There were no anatomical or surgical lectures given at Guy's Hospital at all.

1017. Were any lectures given?—Very many lectures, but not upon anatomy and surgery.

1018. What were the lectures given at Guy's Hospital, surgical, anatomical, or medical, previous to the erection of the new dissecting room?—There was a full course of lectures upon every thing that was considered necessary for the instruction of medical and surgical students, combined with the lectures which were given at Saint Thomas's.

1019. Will you state what were the lectures?—I am not fully prepared to answer that question; there are *Materia Medica*, *Practice of Physic*, *Physiology*, *Midwifery*, *Chemistry*, *Botany*, *Experimental Philosophy*, and others.

1020. Were any anatomical lectures then given at Guy's Hospital?—None.

1021. The schools of St. Thomas's and Guy's were then united?—They were.

1022. Have they been separated since the erection of the new dissecting room?—Not so far as to prevent the surgeons pupils of the one having the opportunity of visiting the other.

1023. Are the pupils who walk one hospital, entitled to walk the other also?—Certainly.

1024. For the same fee?—Certainly.

1025. What are the fees which are now paid at Guy's Hospital by the pupils to the anatomical and surgical lecturers?—I have not the particulars with me; I do not recollect the amount.

1026. Has the lecturer at Guy's Hospital, in the use of the dissecting room, any peculiar advantages which the lecturer at private schools of dissection has not; had he in the year 1827?—I should conceive, with respect to the portion of the expenses that are paid towards the assistance that is afforded, much less is paid for rent and other charges than in other situations.

1027. The question relates principally as to whether he receives the use of the dissecting room without paying to the hospital any rent for it?—He pays a certain sum, but it is not defined whether it is for rent or for the expenses that are incurred.

1028. Do you mean, as treasurer, that the whole accounts are blended together, and there is no separation?—I mean to say that account has nothing to do with the accounts of the hospital.

1029. Do the lecturers pay a consideration for the use of the dissecting room?—They do.

1030. Do the fees given to the lecturer pass through the hands of the treasurer?—They are paid into the steward's hands, and subject certainly to the control of the treasurer; the whole of the pupils fund is paid into the steward's hands, and is also subject to the control of the treasurer.

1031. Then the treasurer is acquainted with the amount of the fees paid to the lecturer?—The printed paper of lectures will explain that; there are certain fees paid for each course and by perpetual pupils.

1032. In whose custody are the account books of the institution, and who are responsible for their production?—The treasurer.

1033. Is there any printed statement of the fees?—There is.

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1034. Is the dissecting room, built within the last two years, part of the institution of Guy's Hospital?—It is.

1035. How then since you, the treasurer, are responsible for the account books belonging to the institution, does it happen that the accounts of any part of that institution are not in your hands, and you are not responsible for them?—The accounts of the hospital, and the accounts of the lecturers are kept quite distinct.

1036. But you, being responsible for the accounts of the whole institution, and the dissecting room being part of the institution, whether the accounts be mingled or separate, are you not responsible for the accounts of the dissecting room?—The accounts of the dissecting room are kept by the steward.

1037. Are they not submitted to you?—They are.

1038. Can you produce them?—They could be produced if requisite.

1039. The whole of the fees received from the students go into a separate fund and not to the hospital, and separate accounts are kept?—Certainly.

1040. All the lecturers and medical men are paid out of that fee fund, are they not?—The lecturers are paid out of the lecture account, and the surgeons are paid out of the pupil account.

1041. Certain fees are received for the pupils walking the hospital; does that form a separate account from the fund resulting from the fees received from the dissecting pupils?—Every distinct lecture is kept under a separate head.

1042. Are the whole of the fees received for each particular lecture paid in full to the lecturer, or is any deduction made for the use of the hospital?—Certain deductions are to be made at the discretion of the treasurer, for what he may consider the expense incurred by each.

1043. Then it will appear distinctly from the accounts kept with regard to the dissecting room, what proportion of the fees it is that is received by the lecturer?—Yes.

1044. Is it the case that no patient is admitted at Guy's Hospital, unless his friends previously give security that they will pay the expense of interment?—That is not the case.

1045. Is not a fee deposited?—No.

1046. Not a fee of a guinea?—No.

1047. Is there no security given before the patient is admitted at Guy's Hospital, whatever may be the object of that security?—When a patient is admitted, it is an object to know who will take the patient on being discharged; and for that purpose, security is endeavoured to be obtained; if the patient dies and is buried by the hospital, one pound is demanded from the security.

1048. Upon adding the new dissecting room to Guy's Hospital, was there any diminution in the number of applicants for admission into the hospital?—I should say, there has been an increased number of applicants.

1049. Was it known to the public in the neighbourhood that there was a dissecting establishment lately attached to the hospital?—Perfectly; it is so large and conspicuous a building, that it must be known.

1050. Then it appears that the knowledge of dissection being carried on, did not indispose sick persons or their relatives to apply to that hospital for relief?—The anatomical school is not within the walls; the inspection room is within the walls.

1051. At what distance is the anatomical school from the walls?—It is within an outward boundary, not where the patients have access.

1052. At what distance?—It is within two hundred or three hundred yards of the hospital.

1053. Was it ever matter of doubt in the neighbourhood that it was an establishment intimately connected with the hospital itself?—It was a matter of so much public notoriety, that I should consider it was not even a matter of doubt.

1054. Then it appears that the knowledge of dissections going on in an establishment intimately connected with the hospital, did not deter patients from frequenting the hospital?—Certainly not.

1055. Does not that lead you to conceive that the repugnance to dissection, which is supposed to exist, may in some measure have been exaggerated by those who entertain fears of publicity?—I am quite sure that if patients, admitted into the hospital, were to consider that they would be dissected, it would have a very material effect; but by good management and great caution being exercised, inspections are every day more readily permitted.

1056. You

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1056. You have no interest yourself in any of the lectures at the hospital?—None whatever; my services are perfectly gratuitous, and have been so ever since I belonged to the institution, about forty years.

1057. Do you think the repugnance to dissection which exists in the minds of the patients that have come to the hospital, is connected in any way with the penal law, which subjects the body of a murderer to dissection?—I do not consider it is on account of murderers being dissected that they abhor it themselves.

1058. Have you thought of ascertaining what is the cause of the repugnance, and whether the penal law referred to is not one of the operative causes upon the public mind?—I believe not; I believe it is the national character, and I believe it to be a very general feeling of abhorrence, which we all feel more or less, and if it could be banished from the minds of the poor, much of their best feelings would be banished with it.

1059. Does that apply to the individual or to the relatives?—To both.

1060. Do you not think if any difficulties or impediments are thrown in the way of obtaining subjects for dissection, that the teachers in the private schools would be greater sufferers than the teachers in the public schools attached to large hospitals?—I have no means of knowing.

1061. Do you not think that the surgeons in the schools attached to large hospitals, who are at less expense in the supporting those schools than the lecturers at private schools, are better able than those lecturers to bear the expense of purchasing subjects, when the impediments are so very great?—Not being acquainted or connected with those schools, I know nothing about them.

1062. Have you reason to know that the teachers of private schools have, within the last few years, found so much difficulty in obtaining subjects, that many of them have been obliged to retire from teaching?—No, I do not; only from general report.

1063. If exhumation was still further discouraged, and, under strict and proper regulations, the rule were general in all hospitals, that persons dying there and unclaimed, should be dissected, are you of opinion that the number of applicants for admission into such hospitals generally would be much diminished?—I have no hesitation in saying that it would be the most injurious thing that could be to the public hospitals.

1064. Is it your opinion that the number of applicants for admission to those hospitals generally would be much diminished?—I think decidedly so; more especially with the superior order of artificers.

1065. Safeguards and regulations have been suggested, confining dissection to such bodies as might not be claimed within _____ hours after death; if such a regulation were strictly enforced, it would not apply to artificers and persons who have relatives to claim their bodies after death; subject to those regulations, do you think the number of applicants would be diminished by their being dissected?—Certainly; because their friends might not hear of their death till after they had been dissected.

1066. But as you do not receive all the applicants, would not there be a sufficient number for reception in the hospital?—Certainly.

1067. If there was a general rule in all hospitals whatever in London, that bodies unclaimed by friends or relations should be given up for dissection, do you think, as all hospitals would then be upon an equal footing, that they would cease to be frequented by patients?—I am decidedly of opinion that they would not be deserted by patients altogether, but by the description of patients who are perhaps the most important to be admitted, and to save their families from pauperism.

1068. Do you advert particularly to that part of the question which states, that merely bodies unclaimed by friends or relatives should be given up for dissection?—I know not at what period you can consider a body unclaimed; those whose friends live in the country may not hear of their deaths till several days after, and they may be cases in which there may be the greatest objection.

1069. What proportion of the persons admitted into Guy's Hospital consist of patients coming from the country?—I have no means of knowing.

1070. Is it a large or a small proportion?—I do not know.

1071. Can you not state whether there are more or less town patients than country patients in the hospital?—I have no means of knowing; they merely come before me with a petition to be admitted; if I were to judge from their dress and appearance, I should say the greater proportion of them are from London.

1072. Can you draw any distinction of a class having a superior claim to admission into a charitable institution, other than the greater extent of human suffering requiring

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requiring aid?—That is the rule by which we judge of the most urgent cases; we never attend to any recommendation from any quarter.

1073. The greatest poverty, suffering under an equal degree of disease, would have the greatest claim for admission into your institution?—The nature of the admission of the patient is such, that it is impossible to inquire into the comparative poverty of the individuals; it is as much as can be done during the time that is allowed, to select them from the urgency of the disease alone.

1074. But in the case of the number of applicants being greater than your means of admission will allow you to receive, if the urgency of the disease be equal, the poorer they are, the greater objects they are of the charity?—If the urgency of the disease is equal, they are referred to the medical officer to determine to which he is most likely to afford relief.

1075. And if the applicants of a higher order were entirely cut off, inasmuch as the whole number of applicants is now redundant, would not the purposes of the charity be carried into effect, were patients only of the poorer order admitted into your institution?—I have before said, that patients are admitted without any exact reference to their poverty; and that I should think, if the artificers were excluded, the most important object of the charity would be defeated, inasmuch as the inferior description of the poorer classes have their parishes to resort to, where they may have relief offered to them.

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1076. Can you state to the Committee the average number of deaths in Guy's Hospital in a year?—We admit about 2,800, of which I should say about 300 die in a year.

1077. Can you state what proportion of those who die in the hospital, are buried at the expense of their friends?—I have not any document with me that will shew this.

1078. Can you state to the Committee what proportion there is of the persons dying at Guy's Hospital, who are unclaimed, and who apparently have no friends or relatives in London?—I do not know the number, but there may be about 40 in a year.

1079. Suppose the artificers were deterred by the fear of dissection from coming to this hospital, would the number of cases of urgency and of persons in the extremity of disease, be sufficient to claim all the accommodation you afford?—When I said artificers, I did not mean to confine it to those, but to exclude persons who receive parish relief.

1080. Putting them aside, would there be a sufficient number of cases of urgent disease, to claim all the accommodation you can afford?—I should say, if the hospital were three times as large, it would be always filled.

1081. Would it be filled with cases of extreme urgency?—No, certainly not; we take in a large proportion of the very urgent cases.

1082. You have stated, that you think a law would be objectionable, which directed that the governors of hospitals should give up the bodies of patients who die and are unclaimed?—Most assuredly.

1083. Do you think it would be equally objectionable if the law were made general, so as not to distinguish hospitals or public establishments, but to permit bodies to be given up for the purpose of anatomical inquiry by the next of kin?—If the hospitals were only subject to the same law to which persons were subject, no prejudice could arise. If we were all made liable, a given number being required, we must each cast in our lot.

1084. If there was a general permissive law, authorising the next of kin to give up the body of his relative if he thought proper to do so, it would not affect your hospital?—Not if it affected persons out of the hospital equally.

1085. If that permissive law were to affect those persons only who are maintained in workhouses at the public expense, and at their death were unclaimed by their relatives, so that their bodies, instead of being buried at the public expense, were as a matter of course to be transferred to the dissecting school, do you think the law would increase the prejudice against dissection?—It would increase the prejudice with those who must expect to end their days in a workhouse, inasmuch as the difficulty would be increased from the disgraceful traffic which would ensue to the persons claiming to be entitled to the bodies.

1086. If all bodies given up for dissection were buried, and should receive funeral rites after the examination has taken place, do you think that would mitigate the prejudice?

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prejudice?—I cannot contemplate bodies being given up as proposed, or have an opinion if funeral rites could be obtained, or whose property they would become.

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1087. Governors would be the next of kin?—I do not think it would get rid of the prejudice; I think the present system, bad as it is, would be the less extensively demoralizing of the two.

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1088. What can you say as to the conduct of coroners in encouraging or preventing the examination of bodies which came under their inspection?—Much prejudice against the inspection of bodies is occasioned by coroners juries; for when coroners inquests are held at the hospitals, more accurate and scientific reports, as to the immediate cause of death, might naturally be looked for, than on such occurrences in other situations; but so far from this being the case, the result of the accident is frequently only recorded, and the verdict given, without any examination having taken place to ascertain the nature of the injury, which, when there is no external appearance, might in the first instance have arisen from a fit, rupture of vessels, or disease. It is usual with coroners to pass censure, if an examination has taken place. When the consent is refused for an examination, so far from any assistance being afforded to them to obtain information so important to the object of inquiry, and of instruction to the profession, it is usual to encourage and confirm the friends, and the large number which are assembled on these occasions, in their refusal and objection to permit any inspection; here the coroner and jury rest satisfied that the accident occasioned the death, but the nature of the injury remains unexplained.

Thomas Halls, Esquire, called in; and Examined.

1089. YOU are one of the police magistrates for Bow-street?—Yes.

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1090. Have you considered the state of the law as it affects persons having possession of dead bodies, whether they are guilty or not of any offence, cognizable by the law for the mere possession of bodies for the purpose of dissection?—I should conceive that the mere possession of bodies for the purpose of dissection was not an offence.

1091. Are you aware of a late trial which took place at Lancaster, and in which a judge gave it as his opinion, that no bodies were legally liable to dissection, except those of murderers?—I have heard that there was such a case.

1092. What is your opinion of the character of the persons who are occupied in raising bodies?—I should think that, from the nature of the occupation, the generality of them would not be the best characters in the community.

1093. Are there any of them who make the raising of bodies a mere pretence for carrying on some occupation still more injurious to the community?—I am not, of my own knowledge, aware of such a fact, but I should have very little doubt that it was the case.

1094. Have you, in your situation as magistrate, ever had persons brought before you pretending to have been removing bodies, but, in fact, who have been removing stolen goods?—Certainly not.

1095. Have you ever heard of such practices?—I have heard that it has been done, but cannot name the instances.

1096. What is the sentence which the magistrates feel themselves justified in passing upon any resurrection men, caught in the act of raising a dead body?—I am not aware that it is within the jurisdiction of the magistrates.

1097. Do they not occasionally commit them as rogues?—Certainly not; when I say it is not within their jurisdiction, I mean judicially; at the sessions certainly they may have jurisdiction.

1098. What is the manner in which the magistrates in London usually deal with a resurrection man, caught in the act of raising a body?—They would be committed to take their trial for the misdemeanor.

1099. And if they offered bail, they would be entitled to be bailed?—Yes.

1100. At the sessions, what is the punishment usually awarded to such an offence?—Either imprisonment or a fine.

1101. What is the usual sentence?—That depends upon the circumstances, and the judgment of the court.

1102. Has it been considered in London as an offence of which the magistrates are cognizant, for a surgeon to have possession of a body which has been disinterred?—Certainly not, as far as I know.

1103. Will not the late verdict at Lancaster, if that shall be found to be good in law, place the teachers of the dissecting schools in the situation of being liable, if detected,

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detected, to an indictment for a misdemeanor?—Certainly, if we are to take the case as reported, that it has been decided that persons having the possession of bodies for the purpose of dissection, knowing them to have been disinterred, simply, are guilty of a misdemeanor, it would have that effect; I have an extract from the opinion of Mr. Baron Hullock, in which he states, that “no bodies but those of murderers are legally liable to be dissected.”

1104. You are aware, probably, of the four last counts in the indictment, upon which two of the defendants were found guilty?—Yes, in one of the counts I see the words “unlawfully procure,” which would put it into a different shape; if they were found guilty upon that count in the indictment, in my opinion, it would give it a different shape. With respect to unlawfully procuring, there must have been evidence to show a prior knowledge; something more than having a body for the purpose of dissection, knowing it to be stolen.

1105. The thirteenth count is, “That the said defendants took into their possession at Warrington, with intent to dissect, the dead body of Jane Fairclough, at that time knowing the same to have been unlawfully disinterred;” will not that count, if the verdict shall stand good, render the greater number of the lecturers and students in London indictable for a misdemeanor?—It certainly would.

1106. Has it been the practice, when any complaints have been made that disinterred bodies have been received at the dissecting rooms, for the teachers, on inquiry being made, to inform the police who are the parties from whom they received the bodies?—Not to my knowledge; I would wish it to be understood, that the public office in Bow-street, being situated in the very centre of the town, we have less cases of misdemeanors of this description brought before us than probably any other police office in the metropolis; I have been seven years in the police, and but two instances have been brought before me in that period.

1107. Previous to reading the case as submitted to the jury by Mr. Baron Hullock, should you have felt it your duty to hold to bail a surgeon, accused of having in his possession for dissection a disinterred body?—Certainly not, without some evidence showing that he was a party in the offence of disinterment; that sort of evidence which would make him an accomplice in a case of felony, an accessory before the fact.

1108. Should you consider it necessary to alter your practice in consequence of that case, it being a case at nisi prius, and not yet having come under the cognizance of the court?—I certainly should not; for in the first place it depends upon the report, which is not in a legal shape at present, and it is impossible for me to know what circumstances might have appeared in evidence to have induced the judge in that case to have come to that decision.

1109. Should you have considered the purchase of a body by a surgeon from a resurrection man, as evidence of his participation in the misdemeanor of raising it?—Certainly not; if I may explain why I should not, it is this; that the offence being a misdemeanor, there can be no accessories to a misdemeanor, they must all be principals. It is different in the case of felony; for there there may be accessories before the fact and accessories after the fact; but in the case of misdemeanor they must be principals; consequently, unless there is some evidence to connect them with the act of the misdemeanor, they cannot be considered as principals.

1110. The purchase you should not conceive to be such a connecting link?—Certainly not.

1111. What is the state of the law with respect to the property of a dead body; to whom does it belong?—I do not know that there is any property in a dead body.

1112. Some judge has laid down the doctrine that it belongs to nobody?—Yes.

1113. Would the nearest relative not be bound to take care to order the funeral of a body, the party not dying in the poor-house?—The executors would be bound, they having assets in their hands; and the next of kin might certainly be indictable for a nuisance, if, by keeping the body disinterred, a nuisance was created.

1114. Would the sale of a body by the next of kin, instead of interment, be a misdemeanor?—I take it not.

1115. Is not the state of the law this; that where persons refuse even to administer, in consequence of the party dying insolvent, that nevertheless they are allowed to incur and discharge the funeral expenses out of the assets that are left, although not sufficient to pay the creditors?—Yes.

1116. Then the law prescribes the interment of a body by the next of kin, or by those persons into whose possession it may come by incidental circumstances?—I can only

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only answer that, as I endeavoured to do before; that if the disinterment of the body creates a nuisance, the party who is the occasion of its remaining disinterred, is subject certainly to an indictment as for a nuisance; and if the executors have assets in their hands, they of course, from that very circumstance of their being indictable for a nuisance, are bound to see the body buried.

1117. And the creditors can make no claim upon them for that appropriation of the money to the funeral expenses?—I should think not.

1118. If no nuisance arises either from the sale or purchase of a body, do you conceive, as the law now stands, that neither the seller nor the purchaser are indictable?—I should think not; for the misdemeanor is for illegally disinterring, and until the body is interred, no misdemeanor is created.

1119. Have you known many cases brought before you at Bow-street, of stealing bodies before interment?—I have never known an instance brought to Bow-street; I had a suspicion in one case.

1120. Have you heard of such being not unfrequent practices, had recourse to by the resurrection men, viz. breaking into houses and stealing bodies before burial?—I have no doubt that is done.

1121. Are you aware that a strong public feeling exists adverse to the practice of dissection?—I think it a natural feeling, and such a feeling as must exist in a high state of civilization.

1122. Do you think that this feeling is in any way connected with that penal statute which gives up the body of a murderer for dissection?—I am not aware of that.

1123. Do you think the repeal of that particular penal statute might tend to mitigate the feeling that at present exists?—I know such a notion has been entertained by many persons, but it is one of which I am exceedingly doubtful.

1124. The repeal of that law could not in any way tend to have a contrary effect, to the prejudice of anatomical science?—It is a speculative opinion entirely.

1125. There are certain offences, such as murder, and other very heinous ones, the commission of which is no sooner known, than the magistrates feel themselves bound to use their utmost exertions to bring the criminals to justice; is the crime of disinterment one of those in which they feel themselves called upon to be particularly zealous and active?—Certainly not.

1126. Is there not a general feeling, that so long as this is the only mode in which bodies can be obtained for the purpose of dissection, it may be expedient not to be over vigilant in bringing offenders to justice?—I feel some difficulty in answering that question; unless cases of this kind are brought before us upon strict legal evidence, we have no authority to interfere.

1127. Has it ever come to your knowledge that the fear of dissection has checked the crime of murder?—Certainly not.

1128. If the law were made general, so as to allow the next of kin, or those parties who might be legally possessed of a body, to dispose of it for dissection, do you think it would not facilitate very much the supply of the different schools, without any prejudice to the public feeling?—I have not the least doubt that it would contribute to the supply, but I very much doubt whether it would not prejudice the public feeling.

1129. Is it the practice of the magistrates of Bow-street, and the magistrates of other police offices in London, to grant a search warrant, in case application is made by relations, to discover a body which has been disinterred?—I do not know of any instance, and I should certainly think myself such a warrant illegal; but that there have been such warrants I believe is undoubtedly the case.

1130. Should you think a police officer was warranted in stopping a dead body which he did not know to have been disinterred, in its way to a dissecting room?—If a dead body is visible to a police officer, it is visible to the public, and therefore, as a public indecency, I think the officer would be doing his duty in stopping it.

1131. Suppose the body not exposed to view, would he be warranted in breaking open a box, for the purpose of ascertaining whether it contained a dead body, and if it did, in stopping it?—I should think he would not be warranted in breaking it open, and that is an answer to the latter part of the question.

1132. Have you heard that bodies imported into London have been stopped by order of police magistrates?—I have heard so, but I do not know of any instance to my own knowledge.

1133. If the law against exhumation were strictly enforced, and it were allowed that the bodies of all persons dying in hospitals or in workhouses, unclaimed within a given time after their death, should, as of course, be dissected, and after dissection their

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remains be decently interred with christian burial, do you think that such a regulation would be revolting to the public sentiment, or no?—I think to the great majority of the public it would be revolting.

1134. Do you think the notoriety of such an arrangement being prevalent in the hospitals, would deter persons suffering under severe maladies from applying for admission to such hospitals?—I should think it would, because the persons that are admitted to hospitals are not certainly the most philosophical class of the community.

1135. Are you of opinion that intense present suffering would not supersede the contingent fear of dissection, in case of death?—It might in many instances, but not the generality.

1136. But if it were the general rule, and there was no hospital in which that was not the rule, do you anticipate that in that event the hospitals would be deserted by patients?—I do not think they would be deserted by patients; in time persons might be reconciled to such a measure.

1137. Extend the same consideration to workhouses; do you think there would be no applications for relief within the walls of the workhouses, if it were notorious that the bodies of individuals dying within its walls would be dissected, unless claimed by relatives within a time specified?—If the question were confined to their applying for relief, I should say, probably not; but I think I may say that it would so far interfere with the feelings of the community at large, that it would create a considerable disturbance in their minds, and discontent.

1138. If the public were to understand that the giving up the bodies of those who die and are unclaimed would be the means of doing away with the practice of exhumation, do you not think that the end proposed would go far to reconcile them to the change?—I think it might go a considerable way; but I am now giving opinions upon a broad scale upon a very serious subject, and upon a subject in which not only the natural feelings, but the religious feelings of the whole community are involved.

1139. Do you think the feelings of the public would be altered, if relatives were allowed voluntarily to give up the bodies, upon receiving a sum of money?—I know nothing in the existing state of the law to prevent it, nor do I know of any thing in the state of the law to enforce it.

1140. Do you think it would be prejudicial to the hospitals and the workhouses, if it were known that the practice was carried on of giving a certain sum of money to the relatives of persons who have died there?—I feel sure of this, that if such a regulation was adopted, more relatives and next of kin would be found afterwards than ever were found before.

1141. You have stated your opinion that a strong prejudice prevails against the dissection of persons belonging to this country; do you think the same feeling would be excited if the bodies of foreigners were brought over and dissected?—The feelings of the next of kin or their relatives could not be excited; but with respect to the public, as I stated before, it is a speculative question, which I am very cautious in answering; my feelings upon the question are these, that it has been considered and is so decided, that the christian religion is part and parcel of the law of this land, and that every person dying in this country is entitled to christian burial; and I think any thing that is a check to that, would certainly create a feeling in the minds of the community, which would operate in a variety of ways, which I cannot see the end of.

1142. But if in every case in which the unclaimed bodies should be subject to dissection, security were given by the person dissecting them, that decent burial and funeral rites should be performed over them, should you not think that that might in a great measure tend to remove the objections?—I think it would, if it could practically be done.

1143. Would it not be in the power of the superintendents of the hospitals and work-houses to take what security they pleased for the performance of that ceremony?—It would be in their power to take it, but whether it would be in the power of the medical men to give it, is another question.

Samuel Twyford, Esq. called in; and Examined.

Samuel Twyford,
Esq.

1144. YOU are one of the magistrates of Worship-street?—Yes.

1145. Are you able to state to the Committee what is the number of resurrection men that there are in this metropolis?—No, my inquiries have not been so extensive; my observation applies only to Worship-street office, which is in a populous district, comprising the parishes of Saint Luke, Bethnal Green, Shoreditch, Christ Church, Spitalfields, Islington, Hackney and several other outlying country parishes.

1146. What

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1146. What is the number of cases of raising bodies that have been brought before you in the last year?—I have not refreshed my recollection by reference to the office books, but I should think I have had half a dozen cases during the time I have been at Worship-street, since 1822.

1147. What can you state generally as to the character of the persons who have been employed in raising bodies?—My own personal observation must be confined to the cases brought before me; but from inquiry of persons who came on other matters before me as a magistrate, and from conversation with the officers, and my own observation and examination of persons who have been brought before me for other offences, but who have been represented to be resurrection men, my conclusion is, the character of the acting body-snatcher is most dangerous to society, as well from being universally infamous and detested, and therefore hardly consistent with any virtue, as from the representation of the fact from the persons before alluded to.

1148. Do they make the raising of bodies a pretence for carrying on other illegal occupations?—I never knew it to be made a pretence; but the result of all consideration of the nature of such characters is, that if they fail in obtaining money for disinterring bodies, they will have recourse to any other means of supply of funds; because, I apprehend, a man throws away all virtue, who throws away all regard for public opinion; that is, the opinion of his own caste or rank in society.

1149. Are there not many of them who keep a horse and cart nominally for removing bodies, but who make use of it for removing stolen goods?—That is implied in my last answer; supposing the body-snatcher to have a cart and horse, he would use them for one purpose as well as the other, at least I should so conjecture; if the churchyards were watched, and they were prevented from obtaining bodies, they would use the cart for other purposes equally injurious to society, though perhaps less offensive to the feelings of the people.

1150. Do you know, in the part of the town over which your jurisdiction extends, what is the number of those who are occupied in raising bodies?—No; our observation as magistrates of police is not so minute as that, nor have we the power of obtaining that information accurately; such information might be obtained more directly and more satisfactorily, because it would most likely be better founded, from, perhaps, the chief officer of the police office to which the inquiry applies.

1151. Do you feel yourself called upon as a magistrate, except upon positive information upon oath, that a resurrection man is in the act of disinterring a body, to be particularly active in endeavouring to prevent the practice?—In my view of the question, and in the district in which I live, knowing, perhaps I may improperly call it, the just horror against exhumation, and the outrageous violence that follows the discovery of such practices, I should feel myself compelled, if I had any fair evidence, to proceed to discover and apprehend such persons, of whose plan and intention I had good evidence.

1152. Do you feel yourself called upon to prevent the commission of such an offence?—Undoubtedly, by all the means in my power; if I received information that a particular watchman was bought over (and it is frequently the case), that on such a time, on such a night, such a churchyard was to be attacked, I should feel it my duty to take means to prevent it; I have done so more than once on receiving such information. I have good reason to believe that one churchyard, in a populous parish in my district, was for several months the regular resource of a party of resurrection-men, as they are called, by connivance of the appointed watchman. It was discovered by the accident of appointing a spare man on watch, who knew nothing of the plan. I had great difficulty in preventing a complete exhumation of the churchyard by the anxious friends.

1153. Do you think it is a frequent case, that persons connected with parish or other churchyards have an understanding with the persons who raise bodies?—I should apprehend that few persons of the rank in life of those whose duty it is to look after churchyards, would withstand temptation long; I would not set a term to any man's honesty; but the reward is so great, compared with the wages of such watchmen, I take it to be impossible to put an end, as the law is at present, to exhumation in churchyards.

1154. What is there in the state of the law, as it exists at present, that in your opinion renders it impossible to put a stop to the practice?—I looked through a title of Burn's Justice "Bodies dead" yesterday, and it seems to me, from what I could collect from the cases there enumerated, and the case I have heard to-day of Mr. Baron Hullock's decision, that it is hardly possible to touch a dead body without committing a misdemeanor, with any view but that of washing it and interring it

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it decently. The first reported case establishing it to be a misdemeanor to take away a body from the churchyard, though for the purposes of dissection, was decided, after argument, before the King's Bench in 1788; it was an offence at common law and *contra bonos mores*.

1155. That was the first case upon which all subsequent legal decisions have proceeded?—Yes; but the objection had never been taken before then; convictions had constantly taken place for this offence at the Old Bailey.

1156. That was the case of Lynn?—Yes.

1157. Are you aware of the case of the King versus Young, in which the master of a workhouse, a surgeon and another were indicted for preventing the burial of a person who had died in the workhouse?—Yes; that is cited in the Term Reports in the case of Lynn, and recognized by the court as having settled the question then before it.

1158. It would therefore at present be illegal in the master of a workhouse to permit a surgeon to receive a body for dissection?—I should think it would be a misdemeanor. The strongest case upon that point seems to be one which was decided by Mr. Baron Graham at Kingston; a man had been executed, and what was to be done with his body? It was to be buried decently, and the gaoler, instead of himself taking care to bury it decently, gave it to a man whom he ordered to bury it decently, but who instead of burying it, sold it; and that man was indicted for so selling it, and he was found guilty, and it was said it was a misdemeanor to sell the body; and it was not considered necessary to give direct evidence of its being sold for lucre or for dissection. A body is not property, for which you can bring an action, but it was said in that case the sale was a misdemeanor.

1159. You consider it would be a misdemeanor in executors to give up a body to be dissected before burial?—I should think it was, from the cases that have been decided. The principle of the cases seems to me to be, that it is *contra bonos mores*, and hurtful to the interests of the public, as being contrary to their moral feelings to treat dead bodies as subjects of any thing but funeral rites and interment.

1160. If a person bequeathed his body to a surgeon for dissection, do you consider it would still be a misdemeanor on the part of the executors to give up that body to the surgeon?—No property being involved in it, I see nothing to protect the surgeon or executor from the application of the principle which seems to have governed the decided cases.

1161. Upon the same principle you would say, if a man, before death, sold his body to another, the person purchasing the body, and receiving it afterwards for the purposes of dissection, would be guilty of misdemeanor?—I am not sure that I am right in extending the application of the principle so far as I have done, but I do not see how that could be got over, consistently with the other cases; for it seems as objectionable as the other cases, upon this principle.

1162. You are fully impressed with the importance of dissection for the purpose of giving anatomical knowledge to medical and surgical men?—Certainly; nobody can deny that it is absolutely necessary.

1163. Nevertheless, you consider it your duty as a magistrate, knowing the character of the men concerned in exhumation, to do your utmost to put a stop to the practice?—I feel it my duty to put a stop to it, notwithstanding the injury that may result to the science of Anatomy; that is, to put a stop to the practice of exhumation, and I should take it to be my duty to put a stop to sales of bodies.

1164. Should you feel yourself entitled, if you heard a disinterred body had been carried to a dissecting room, to issue a search warrant to ascertain whether that was so or not?—It would depend upon the mode in which I was pressed to do so; perhaps I should not issue a search warrant, but a warrant to apprehend some party to a misdemeanor.

1165. Suppose you were pressed to the utmost by the relations?—Then I should ask for some evidence to show how the body got there; I should ask, has the body been disinterred? what evidence have you to show the body was buried in such and such a place, and has been disinterred? and if they had evidence of that, I should go on to inquire, what evidence they had that the body was then in the particular place mentioned; and if they said they saw it there lately, or had some sure evidence of it, I do not say that I should grant a search warrant, but I would send an officer; I would take every measure to unravel the misdemeanor, short of rendering myself liable to an action by granting a search warrant. From my own feeling, I should not do it, because in some dispositions of mind I might think the feelings

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feelings of the relatives should be sacrificed to the public benefit; but a magistrate should have respect to the law, and not his private opinion.

1166. In fact, if inquiries are made by the police officers at any dissecting rooms, whether they know any thing of the body of an individual, are the dissecting establishments backward in communicating what they know upon the subject?—I never heard of such a case as those questions being put to dissecting establishments.

1167. Are you of opinion with Mr. Halls, that a purchase, on the part of the surgeon, of a body that has been disinterred, does not connect that surgeon purchasing with the misdemeanor of disinterment?—I cannot universally agree with my friend, Mr. Halls, in that matter; I am of opinion, that very slight evidence would convict the surgeon, and that it is not necessary that he should be actually present at the time of disinterment, in order to render him liable to, at least, accusation; for every body who has any thing to do with the transaction, is principal in the misdemeanor.

1168. Should you consider the naked fact of the purchase by a surgeon from the party who has disinterred the body, sufficient evidence to connect him with the disinterment?—I am not aware how far the case decided before Mr. Baron Hullock goes, but I should think the surgeon in such a case, would be called upon to clear himself by some evidence against the natural inference; if evidence on part of the prosecution were brought to show he bought it of *A. B.* or *C. D.*, who dug it out of the ground, I should think such a case would be suffered to go to a jury, upon the circumstances.

1169. Even although the party purchasing had no knowledge of the fact of disinterment?—I should collect that knowledge from the other circumstances, if strong enough to justify the inference.

1170. Do you agree with Mr. Halls in opinion, that under the law as it now stands, there is no impediment to the next of kin legally selling the body of his relative?—I should think it was a misdemeanor, as the tendency of the judges opinions is to be collected. One does not see how consistently with the cases, the next of kin could sell such a dead body, without offending against the law.

1171. Has not the law treated the disinterment as the *corpus delicti*?—Not always, I think; for the case I mentioned, was for the sale, when the court ordered the executed body to be interred, and it was sold by an intervening person, and that was considered a misdemeanor; and the case of Young and others, was for a conspiracy to prevent burial.

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1172. That was a sale by a person not related to the deceased individual?—As there is no property in the body, that would not seem to have any connexion with the principle.

1173. Has it been distinctly ruled, that there is no property in the body?—I believe so. It is treated by the authorities cited in Burn's Justice, as very old law, that there is no property in a body.

1174. Do you think, if the crime of exhumation could be prevented altogether, that the people would be more reconciled to the law which permitted the sale and bequest of bodies?—I should think they would; they would not at first, but the magistrates and other persons would take pains to show the advantages to public decency, by totally preventing exhumation, and allowing other means of procuring bodies, without offence to public decency; without offending *contra bonos mores*, and such means, I think, might be invented.

1175. Do not you think the regulation of all bodies, applied to the purposes of Anatomy, being buried with funeral rites, would tend to remove the prejudice?—Certainly, it would remove in my mind, one very great difficulty and objection.

1176. Being strongly impressed with the importance of dissection, do you not think some other means than that of exhumation should be employed for procuring subjects?—Certainly; I have sometimes wondered at complaints of smuggling and poaching being the causes of crimes of much greater enormity, whilst exhumation, and those who live by it, seemed to escape notice.

1177. If it were rendered more highly penal to disinter bodies, and if the bodies of persons dying in hospitals and workhouses, were transferred to the dissecting room, provided they were unclaimed by their friends within a given time, and if after dissection their remains were interred with decent rites, would the public feeling be hostile to such regulation?—I do not believe it would; it might for a time, but I do not believe any person cares for a body being dissected, if it be not his own relation, and his mind be not drawn by some circumstance, to dwell upon the fact in detail; they would object to digging up in an open place, as dead bodies are now necessarily
exhumed

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exhumed, but nobody cares whether *A. B.* is dissected, if it is not brought before his eyes by some unnecessary exposure or indecency.

1178. Then are you of opinion, that subject to the regulations which have been stated, of the funeral rites being performed, and an opportunity given to the relations to claim the body, that it would be any outrage upon the feelings of the public?—No; I think regulations might be made so as to prevent the feelings of the people being outraged.

1179. If the doing away with exhumation were to be the concomitant of any new plan for obtaining a supply of bodies, do you not think that would tend strongly to reconcile the public mind to the change?—Certainly; it is a choice between two evils; it is not difficult to show, that the present evil of exhumation, as now obliged to be conducted, is the greater.

1180. Are you, as a magistrate, of opinion, that the circumstance of dissection, constituting a part of the punishment of murder, has any effect in deterring the person who meditates perpetrating that crime, from committing it?—None whatever, I should think.

1181. Such a case has never come to your knowledge?—It cannot be asked as a question of knowledge, but as a matter of speculation; from consideration of the motives of human actions, I should think it made no difference upon the man meditating the crime of murder.

1182. Should you not suppose the taking away that part of the punishment, would have the effect of reconciling, in a considerable degree, the public feeling upon the subject?—I think the abrogation of the consequence which attaches to making it a part of an ignominious punishment, would be beneficial in reconciling public feeling to such proposed change; as it forms an ingredient, perhaps the most reasonable of any, in the prejudice against submitting even one's own body to the anatomist, for the benefit of the public.

1183. You have stated, that in your opinion, the public have no feeling hostile to dissection, except when it is brought home to them individually, by dissections taking place on the body of a relation; how then do you account for the general feeling against exhumation?—Because that of itself is an outrage, and is brought under the eyes of every body in a most revolting and disgusting manner. It is besides public (when the discovery takes place), and few people like to be thought to have no regard for their deceased friends. Sometimes, too, it may perhaps be the subject of vulgar reproach.

1184. Then your opinion is, that though the general feeling is against dissection, independent of being brought home to the feelings of each person, no such general feeling prevails against dissection?—I think not; I think it is more against exhumation than dissection.

1185. Are you aware of the price that is given for bodies now?—I have heard of it.

1186. Knowing the high price that is given for dead bodies, do you think that price is too high for the safety of the living?—I do not know how to answer that; I have said before, there will be no stop to the practice whilst the law continues as it is, or perhaps I ought to say, whilst the present impression or conception of what is the law, exists; the difficulty may increase of obtaining dead bodies, but the practice will continue.

1187. Have you brought with you any returns which will show the number of persons who die in any of the parish workhouses in London, and the number of such persons whose bodies are unclaimed?—I have obtained some returns, which I will deliver in.

[*The Witness delivered in the returns alluded to.*]

1188. Is there any further point that you wish to state?—No; I have nothing further to state to the Committee; any thing that would tend to remove the prejudice in the public mind, and the indecency of the practice of exhumation, would be desirable.

1189. Do you see any thing impracticable in the suggestions which you have heard in the course of this day's examination?—I think it is a very delicate question; but it might be managed so as to effect the object of this inquiry.

William Ballantine and Thomas Richbell, Esqrs. called in; and Examined.

*W. Ballantine, Esq.
and
T. Richbell, Esq.*

1190. YOU are magistrates of the Thames Police?—Yes.

1192. Will you state whether you think the magistrates have authority, in case they

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they hear of any dead bodies, disinterred or not, being transported from one place to another, to order an examination of the packages containing those bodies?—I think they have that authority.

1193. In fact, when upon a late occasion some bodies had been imported into this country, did you not issue warrants for the seizure of the packages?—I sent an officer on board the vessel without a warrant.

1194. Do you consider yourself, under all circumstances, fully authorized in any similar case to issue a warrant?—I consider myself authorized to do so; but whether I should do so or not, would be matter of discretion. If bodies were again brought into the river under the circumstances in which those were brought, I should feel it my duty to interfere with them.

1195. What were the circumstances particularly attending that importation, which induced you to interfere?—The Irish steamers were coming in freighted with dead bodies; I received many anonymous letters upon the subject; I disregarded them, or I did not regard them further than inquiring how the facts stood; but at this time I received some anonymous letters, and letters not anonymous, of a different character from those I had formerly received; they stated that bodies were on board; that no attempt was made to conceal the fact; that the passengers complained of the stench; and that, somewhere at the Land's End, some circumstance occurred on board the vessel, and two or three of the bodies were thrown overboard. There was little or no endeavour to keep the fact from the public, otherwise the magistrates would not have interfered.

1196. Was any notice taken, on the arrival of the steam packet in the river, by the passengers, respecting the offensive nature of the bodies?—No; I received letters from them before she arrived. Some of them left the vessel when she made the first land, in consequence of the stench and inconvenience; but I am not aware that I should then have interfered with them, without a formal application upon the subject, but that the river population is of a very peculiar character. We have a vast number of Irish and other labourers, whom it is very difficult to manage, and I did not know what would be the consequence of these persons getting a knowledge of the traffic; I was afraid of some disturbance in the neighbourhood.

1197. Did not the issuing of the warrant for the seizure of the body give it increased publicity?—I had provided against that. The officer went on board; nobody but the master knew the purpose of his being there; all the persons on board knew there were dead bodies on board.

1198. Did not the sailors know they were dead bodies at the time they were shipped on board the vessel at Dublin?—I have no doubt they did.

1199. Were the sailors, who were cognizant of the bodies having been received on board, the fittest persons to raise objections?—No, perhaps they were the least fitted; but the objection was raised. The fact was brought to my knowledge.

1200. Who were the parties who gave notice to you?—They were anonymous letters; some were signed by the parties, but I have no doubt a part were written by the crew; and two, which were in the same style, were from persons employed in raising bodies in town.

1201. After the warrants had been issued, were not the bodies allowed to find their way to the dissecting rooms?—That I have nothing to do with. I sent an officer on board the vessel, and I saw him afterwards, but I made no inquiries into the matter.

1202. Did you issue a warrant for stopping any of the parties for importing the bodies?—No; I could have traced the thing I dare say, but I carried it no further than I have stated; nor should I have carried it so far as I did, if the business had been conducted so as not to have been forced upon my notice.

1203. Have you any means of knowing what is the number of persons employed in London in raising bodies?—No, I have not; I believe they are very few, there are two persons who are the heads of establishments, and who employ inferior agents; there are two men in particular of whom I have heard; but there are a great number of persons employed for the mere purpose of raising the bodies.

1204. Are cases of disinterment often brought before you;—No, very seldom; not at all.

1205. What have you heard in the course of your magisterial capacity respecting the conduct and character of the men so employed?—They are thieves.

1206. Do they make the raising of bodies a colour for the practice of thieving?—That has never come to my knowledge, but they are the same class of persons as the thieves; I should class them generally with thieves.

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1207. Having heard the evidence of the two preceding witnesses, is there any thing connected with the subject concerning which they were examined, which you think it of importance to state to the Committee?—I agree with Mr. Twyford in his law upon the subject in every point, and in his view generally of the subject I agree with him; I believe it would not be offensive to the public, if bodies were to be brought up from the North, or from the Continent, or from Ireland; bodies are imported from Ireland, and from the Continent, and from Holland; if they were to be brought and decently disposed of here, I believe there would be no interruption whatever; but I believe if there is any legislation upon the subject to legalize the importation of bodies, they will legislate on the other side of the water against you, and put an end to it.

1208. Do you not think it desirable, if possible, to put an end to the practice of exhumation in this country?—I believe it is certainly most desirable; it is that which is so offensive to the public; it is every way bad; it encourages a set of thieves.

1209. Are you yourself impressed with the importance of surgeons learning their profession by means of dissection?—Very strongly.

1210. Have you considered the suggestions which have been thrown out for obtaining a supply of bodies from hospitals and workhouses, by giving up the bodies that are unclaimed by friends or relatives?—Yes, I have; and I think without legislating upon that subject, it may be effected, if care be taken in the doing of it; at present, if I recommend my servant or any other person to an hospital for relief, I believe, I am required to give security to take away the body and bury it, in case of death; now instead of that, if it were understood at the hospital that the body should be removed within twenty-four hours after death, otherwise it would be buried or disposed of by the hospital, parties would have no cause of complaint; if they claimed the bodies within twenty-four hours, very well; if not, then the subjects might be used, first for the purpose of anatomical surgery, and afterwards be interred without causing disturbance or exciting attention.

1211. Will you explain to the Committee how that can be done legally without an alteration in the law, there being a case in which the master of a workhouse, a surgeon, and another person, were indicted for a conspiracy to prevent the burial of a pauper who died in the workhouse, the fact being that the body was removed to a dissecting room?—It would be a misdemeanor; there would be some inconvenience to the party, but when the thing is conducted with perfect decency, the punishment, if any, would be very slight.

1212. Can you expect that the superintendents of hospitals or workhouses should lend themselves to the introduction of any such practice, when they may render themselves by so doing liable to an indictment for a misdemeanor?—It might not be prudent for them to do it, but still I think they would do it.

1213. Have any vessels arrived in the river, except the one you have now stated, from Holland or other countries, bringing cargoes of human bodies?—Not that I know of; I have heard of it, but I do not know the fact; with respect to the Irish steamers, they come regularly freighted.

1214. Can you inform the Committee from what foreign countries bodies have been brought?—I only hear as matter of conversation; they get them from France and Holland, I believe.

1215. Do you not think it would be better to repeal any law which makes it a misdemeanor to dispose of a body, and to allow persons in general to dispose of a body which they may legally have in their possession, than to specify that hospitals or workhouses in particular should be allowed to give up a body?—I am not able to say that; as a mere matter of business, I should let the thing alone; I think that medical men, the persons who are interested in receiving subjects, should procure them from abroad, or from the hospitals and workhouses, and not elsewhere; prejudice is so strong, that legislating will never remove it; certainly not at present.

1216. Are you aware that bodies cannot be imported in any quantity in a state fit for dissection?—I was not aware of that; and I have seen an antiseptic process which has kept them for many months.

1217. You consider this supply from abroad would be sufficient?—I think it might.

1219. In time of war how could you get the supply?—That would be interfered with.

1220. Then the supply would be totally at an end?—It would be interfered with; I apprehend

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I apprehend there might be a supply from the public hospitals and the workhouses, if there be no legislating upon the subject; but I am apprehensive of that.

1221. You would repeal the law of misdemeanor?—I would leave the law as it is; the magistrates do not interfere with the establishments for lectures upon Anatomy; the thing has proceeded for a long while, and may proceed, if not thrust upon the magistrates, or upon the attention of the public.

1222. Do not you think, if it was made lawful to dispose of a body, that the friends might be induced to avail themselves of such permission, and to part with bodies to anatomists?—I do not think the friends of the deceased would in any instance avail themselves of the law and sell the body, as well out of some respect or feeling for the deceased, as from apprehension of public prejudice and resentment; a dead body does not, that I know of, vest in any one as property.

1223. Does not the odium arise in consequence of making it a criminal offence?—No; if you inquire why a body is required to be buried, it is for the general health of the community.

1224. What advantage is derived from the law remaining, which makes it a misdemeanor for any one to dispose of the body of his relative?—He has no property in it; the body must be buried. If the party have assets, the assets must be applied to burying him; or if not, the parish must bury him.

1225. You have spoken of the conduct of the magistrates; that only applies to London; do you conceive in the schools of Anatomy in the country, where probably the dislike to dissection is stronger, and the magistrates not so disposed to lenity towards such offences, that the same observations apply?—I do not believe the magistrate would interfere, unless the conduct of the anatomist forced the subject upon him. Should a complainant state of a surgeon, "I know there are bodies for the purpose of dissection in this surgeon's premises, and I desire you, the magistrate, to give me a warrant;" the magistrate would say, "I will not give it you; you may indict him at the sessions."

1226. Do not you know that the practice of exhumation has been so general as to excite a great alarm in England and Scotland, and that guards have been sent to protect the bodies which are expected to be disinterred?—Certainly.

1227. Then any means which could prevent the practice of exhumation would have a good effect upon the community?—Certainly.

1228. If bodies cannot be had in any quantity by importation, there only remain the two methods of obtaining them, either by exhumation or by the voluntarily giving them up, in the manner suggested, by parish workhouses and hospitals?—And also by importation.

1229. Now do you not think that of the two practices, that of exhumation and that of obtaining them from the hospitals and workhouses, the former is much more likely to encourage the dislike which the public feel to dissection?—I think it is; I mean to say, that exhumation is that which is very offensive to the public; they cannot get over it. A part of the sentence of a murderer is, that he be anatomized; the circumstance of his being anatomized is distressing to the survivors, only because the diseased is deprived of sepulture. There are many clubs in London for the purpose only of establishing a fund to bury the members as they die off; there is a common desire for decent sepulture, and a common feeling against the disturbance of the grave.

1230. Then if burial was to take place after dissection, it would not affect the public mind so much?—I think the public mind would be reconciled after a season.

1231. Are you aware that great difficulty has been found in obtaining the requisite supply of bodies for the surgeons by exhumation alone?—I know that the supply has become defective, for the price has been raised from three guineas to ten guineas.

1232. Do you not think it is a great hardship upon the surgeons themselves, who are men of education, and expected to learn their profession properly, that they should be obliged to have recourse to men of bad character and illegal practices for the means of doing that which is their positive duty?—Certainly, it must be very shocking to men of education and gentlemen.

1233. Then on their account and that of the public, you think it desirable that exhumation should be done away with?—Certainly.

1234. From your experience as a magistrate of the Thames police, can you inform the Committee whether any difference of feeling prevails amongst sailors upon the subject as compared with landsmen?—No, I am not aware of that; I hear that sailors have certainly a great objection to dissection.

W. Ballantine, Esq.
and
T. Richbell, Esq.

12 May
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James Glennon
and
Richard Pople.

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1828.

James Glennon and Richard Pople, called in ; and Examined.

1235. YOU are officers at Union Hall?—(Pople.) Yes.

(Glennon.) I was so, but retired not long since.

[Glennon was directed by the Chairman to make answers to the questions, and Pople to make any observations on such answers, if he differed from Glennon.]

1236. Will you state to the Committee how many men you think there are in London employed in raising bodies?—I can hardly answer that distinctly.

1237. Is it more or less than sixty?—Nearer two hundred.

1238. Are there any particular sets or gangs in London employed in this business?—Yes, they go in parties.

1239. Is there the Spitalfields gang?—Yes, but they go about and quarrel and fight, and change about.

1240. Can you state what the gangs are, and what are the names they go by?—No, I cannot exactly; there are many I know, but I do not know their names.

1241. What is the usual character of these men; do you think most of them gain a livelihood by raising bodies alone?—Not exactly.

1242. What are their other occupations principally?—Thieving, more or less.

1243. Do you think that the horse and cart that they keep for removing bodies, is of use to them for any other purpose?—I should think not, except for taking them out of town.

1244. Do not you think it would serve them in removing stolen goods?—I should think it would, or in committing robberies; I know one instance particularly.

1245. Do you know of any instance in which men pretending to be removing bodies, have been in fact taken in the act of removing stolen goods?—I have known them to go out with the view of obtaining bodies, and they have committed burglaries when they have been out, because they have been interrupted in raising the bodies; I know of the instance of Hollis and Cave, regular body-snatchers, who were so apprehended; they were taken up, and had six months imprisonment in Maidstone gaol, for having housebreaking implements in their cart.

1246. You do not think that is a very unfrequent case, making the removing of dead bodies a cover for other illegal occupations?—I know there are many men who have been in the hulks, or transported.

1247. Are there any of these persons who are of a better character than the others, and who really do follow the raising of bodies as a livelihood, and do not thief?—There is a great difference; some are very respectable and decent in their manner, and follow the thing so privately that nobody knows anything about it; there are some very steady.

1248. How many do you think there are who really follow the raising of bodies as their regular livelihood?—Very few.

1249. Are there ten?—I do not think there is more, if there is that number.

1250. Do they ever, when one interferes with the work of another, inform against one another?—Frequently.

1251. Is not that the most common mode in which they are found out?—No, they are not found out sometimes, although they do that; because there has been a great noise and bustle in their doing that, and a great deal of mischief has been done in alarming the neighbourhood, and the persons the subjects belong to; bodies are often returned to their friends, in consequence of one or the other giving information.

1252. Did you ever hear of their informing against the very persons to whom they had sold the bodies?—I never had an instance myself; it happens now and then, I believe; but it is seldom the same men who take them there, who inform us, but other men who knew something of it.

1253. Your orders are, probably, not to be as active in endeavouring to detect a resurrection man, or to prevent his raising a body, as to prevent a felony or a murder?—It is not the same as it used to be; I used to take a great deal of pains to detect them; I spent a little fortune in following them formerly, but not of late.

1254. You pretty well know who the men are in London who pursue this trade?—Yes, we cannot help knowing them; we are out all hours, and running against them.

1255. Do you meet with any encouragement from the hospitals in being very strict and active in endeavouring to discover the resurrection men?—No; I never was encouraged on either side, not even by the people I acted for; I have recovered
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between fifty and a hundred bodies for persons whose houses have been broken open, and the body stolen out of the coffin prior to their being buried.

1256. Do you think many bodies are obtained by breaking into houses and stealing the bodies previous to burying them?—There have been a great many; I have a staff which was presented to me by my neighbours for recovering a body.

1257. When information has been given that a body has been disinterred, do you find any difficulty at the dissecting rooms in obtaining information concerning it, or concerning the person from whom they procured it?—I never met with any difficulty, if I knew the body was there; but unless I could go and say it was there, and knew it was there, I did not get that assistance; if I perfectly knew it was there, I have always been treated very respectfully.

1258. Have you often search warrants entrusted to you for examining dissecting rooms as to whether a body has been removed there?—I never went with a search warrant in all my life; the gentlemen there, are generally kind enough to go with us over the theatre, when we do go; I have been thirty years in my situation, and I was well known to them, and they always behaved so respectfully, that I always went without a warrant, and could do more without a warrant than with one.

1259. You never felt the least obstruction at the anatomical theatres?—No, none at all; they went with us, and if we found the body there, we took it away privately; I have known many cases in which the different parties of resurrection men have quarrelled, and have broken into one another's houses, and stolen the bodies, before they could be conveyed to the theatres; and they have been so violent, that they have cut a body into pieces and carried it to the opposite party's house, and raised a mob there; a thing which they were innocent of.

1260. Have you heard that to destroy the work of another, they go to the churchyard and leave the coffin standing upright?—Yes; I have known them fight in the graves.

1261. Then you probably think the resurrection men, with some few exceptions, the most worthless class of the community?—The most dreadful.

1262. Are you aware of a strong feeling in the public mind against the raising of dead bodies?—Very much so indeed; and mostly in the lower class.

1263. Is the feeling with respect to the body being dissected, as strong as the feeling with respect to the body being taken from the grave?—They are equally strong.

1264. Suppose it was the body of a person dying a perfect stranger to every body in this town, do you think the people then would feel much about its being dissected by the surgeons?—Very much; those who knew it.

1265. You have heard of relations consenting to the bodies of their friends being examined in hospitals?—Many times.

1266. But such relatives would not have given consent to the bodies of their friends being dissected?—Certainly not.

1267. They would object more strongly to the bodies of their friends being disinterred, than to bodies of their friends being examined by the surgeons?—Certainly; they are more inveterate against the persons who raise them than against the medical men.

1268. When a man commits a crime, do not you think he generally does so calculating upon the chances of escaping detection and punishment?—Most certainly.

1269. If he knew he was certain almost immediately to be punished, he would seldom commit a crime?—I cannot speak to that.

1270. That would be a check upon him?—Most likely.

1271. When a man thinks of committing a murder for instance, do you think the chance of being anatomized after death is very likely to deter him from committing that murder?—I should think not.

1272. You think what is most likely to deter him from committing the murder, is the expectation of being detected and punished?—Most likely.

1273. Do you not think that the law which directs the body of a murderer to be anatomized, has an influence on the public mind, so as to indispose it to the dissection of dead bodies?—Very likely.

Mercurij, 14^o die Maij, 1828.

Dr. James Macartney, called in; and Examined.

Dr.
James Macartney.

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1274. WILL you state to the Committee what situation you hold at Dublin?—Professor of Anatomy and Surgery in Trinity College, Dublin.

1275. Have you any experience in England as well as in Ireland?—Yes, I taught Anatomy, as demonstrator to Mr. Abernethy, as far back as the year 1798; so that altogether I have had thirty years experience.

1276. How many years were you demonstrator to Mr. Abernethy in London?—Three years; and at a subsequent time, I was teacher of Comparative Anatomy and Physiology at St. Bartholomew's Hospital.

1277. Are you desirous of stating to the Committee your opinion as to the principal cause of the difficulties which have arisen in this country in obtaining a supply of bodies?—Yes; and I suppose the best way to do so would be to review the progress of the subject. At the time which I have mentioned (the year 1798), bodies were abundant in London, and could be procured at the price of from one to two guineas; at that time, also, none of the grave-yards at any distance from London were invaded; at the same period there were three hospital schools, a school at Windmill-street, and Mr. Brookes's, making only five altogether; at St. Bartholomew's hospital there were, at the time first mentioned (1798), about seventy pupils; in the Borough about 110, according to the best of my recollection; in Windmill-street and at Mr. Brookes's about sixty each; making altogether about 300 anatomical students. At that early period, also, I wish to mention, the character of the resurrection men appeared to be very different from what it is at present, and this I attribute in a great measure to the rarity of prosecutions; they were seldom treated as criminals; when they were taken in the fact, they were usually liberated, and consequently did not look upon themselves in the same light as they are obliged to do at present. After that period, the number of anatomical schools increased in London more than was necessary for the demand, in my opinion, and especially the number of private schools, of which there are now eleven in London, and four provincial schools. This created contention between the different parties of resurrection men, who were employed by so many different teachers, and was one of the first causes of the difficulty in procuring bodies in London. At the same time, the religious prejudices of the Scotch, respecting the sanctity of the dead body, seemed to come into operation in a very remarkable and unaccountable manner, so that every grave in the neighbourhood of Edinburgh and Glasgow began to be secured in such a way that it was made quite inaccessible; the consequence of which was, that the resurrection men were obliged to go to some distance from the capitals, and that again led to frequent detections in both countries, and every detection induced still greater precautions in country situations, as might be expected. These detections were published in the newspapers, and copied into the Irish papers; and to that may be attributed the origin of the prejudices or the excitement of the public feeling in Ireland upon this subject.

1278. What was the state of public feeling upon the subject in Ireland formerly?—At the period of 1813, or at an earlier one, there were but two schools in Dublin, besides one private school for dissection.

1279. Will you enumerate those schools?—The University, the College of Surgeons, and Mr. Kirby's private school. At that time, it was the practice for students to go out for the purpose of raising bodies, in company with the porter of each establishment, and not only medical students, but students in arts in the university frequently went for the purpose. After I went to Dublin in 1813, I introduced the system of regular parties of resurrection men, and for some years there was no difficulty in obtaining any number of subjects that were required, at the expense of from half a crown to ten shillings. At present, there are in Dublin the same two public anatomical schools, besides six private schools, and a person resides there, who lives by exporting bodies. There are also two provincial schools in Ireland at present, one in Cork and the other in Belfast. Until the difficulties had increased in England and Scotland, and until there had been frequent publications, in the Irish papers, of the detection and punishment of persons for raising bodies, there was very little popular feeling with respect to dissection; for the last three years, there has been a great deal of export trade of subjects carried on from Ireland to Scotland, and to London.

London. This, and the causes already mentioned, have produced a considerable difficulty with respect to obtaining bodies in Ireland at this moment.

1280. Can you state the present price of bodies in Ireland?—The price which is still given by every teacher in Dublin, except myself, is the old price, *i. e.* from ten shillings to half a crown, with a gift at the end of the season. The export price is double those sums, or from one pound to a crown, and those prices I gave last winter, and consequently was amply supplied. The view I have taken of the question is this; if you have ready communication by steam more especially than by land carriage, the difficulties that exist in one part of the United Kingdom will soon be felt in every other part. If bodies be cheap and plenty in one part, a supply will be got from that part for those places where they cannot be so easily procured. I have reason to believe that a considerable number of the bodies that have been used in London and in Scotland for the last two years, have come from Ireland. This species of trade, however, cannot long be continued without raising popular indignation, as has been proved within the last few months in the city of Dublin. A report was propagated there, which originally had been circulated in Scotland, that children were kidnapped for the purpose of dissection, and this became so currently believed by the populace, that it was necessary to protect one of the anatomical schools, for nearly a week, by means of the police. This strong feeling in the public mind arose chiefly from the supposition, that these children were to be sent over either to Scotland or England by the steam vessels. The difficulty has indeed been so very great within the last few months, that most of the schools in Dublin have been unable to finish their winter dissections at the usual period. The common people frequently of late have assaulted the resurrection-men; one of these men died in consequence of a severe beating, and another in consequence of being whipped with a sort of cat-o'-nine tails made with wire, and others were thrown into the water. In the first of these cases I paid the expenses of a prosecution for murder against the parties; they were not convicted, but the prosecution had a very good effect on the state of public feeling. I may add, that lately also, even medical men and medical students were assailed by the people, and that at present the resurrection-men go to a great number of grave yards, some distance from Dublin, provided with fire-arms and are accompanied frequently by several students armed in the same manner.

1281. What is the number of students now practising dissection in Dublin?—I should think about 500.

1282. Of that number, how many are English students?—Probably not 100.

1283. Are there any students from foreign countries also?—Occasionally.

1284. Are there many foreign students?—Not many; some have come from America and the Continent, but the greatest number of strangers have been from Great Britain.

1285. You have stated, that you thought that the private schools in London were too numerous; upon what do you ground that opinion, when it appears that there are more surgical students than London is able to supply with the means of education, since they resort to other countries for that purpose?—They resort to other countries from necessity; I conceive that half the number of schools that exist now in London, could give ample accommodation in their rooms, and afford sufficient education, if they had the means of readily obtaining dead bodies.

1286. Does not some advantage arise out of the multiplicity of schools, inasmuch as an opportunity is afforded to young teachers of talent, to develope new views?—I should certainly admit that to be so, provided those new teachers were always qualified persons. At present there is no test; there are no means of ascertaining the qualifications of the teacher. The College of Surgeons have, in London, instituted regulations by which they require certain certificates; but they have instituted no regulations for determining the qualifications of the teachers who are to give those very certificates, nor have they made any provision against receiving false certificates, which are very frequently presented to them.

1287. But inasmuch as they do not receive certificates from the teachers of private schools indiscriminately, the insufficiency of the certificates from the teachers of private schools, cannot be attributed to the rules of the College of Surgeons?—I think it can, upon this principle, that they require no qualification; any man may become a teacher upon any subject; and nothing is more common than for young men, immediately after they have passed their examination for license to practise, to profess teaching some branch of medical science.

1288. Is not this an inconvenience which belongs to an unrestricted system in every

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every art and science, that there must be some good and some bad teachers ; but, upon the whole, is not the acting without fetters found most conducive to the progress of science ?—As a general proposition, that must be admitted, no doubt ; but still I am inclined to adhere to the opinion I first gave, which is, that there should be a qualification for teachers as well as a qualification for those that practise ; because, in fact, the qualification of the persons who practise, depends upon the knowledge and abilities of those very men from whom they receive certificates.

1289. The College of Surgeons do not receive certificates from the teachers of private schools ?—They do now, universally, from teachers in London, Dublin, Edinburgh, Glasgow and Aberdeen.

1290. Can you point out in the rules of the College of Surgeons, dated 20th February 1826, that particular regulation which permits the teachers in private schools to give certificates ?—It is not expressed in these rules, but it is done, and authorized by subsequent regulations. I am quite certain of the fact.

1291. Do you mean, that the teacher of a private school in London, if he be not attached to a public hospital, is allowed to give certificates ?—He is ; I know the college does receive those certificates ; I do not speak from hearsay, but from knowledge of the fact.

1292. Can any person without previous examination, or the authority of any constituted body, commence lecturing upon surgery in Dublin ?—He can ; but his certificates will not be received in London, unless they are received by the Irish College of Surgeons ; but he requires no authority from any human tribunal for constituting himself a teacher of any part of medical science, either in London or Edinburgh or Dublin.

1293. Is any diploma of the College of Surgeons, or of the University, or of any other constituted authority in Ireland, necessary to enable a person to practise surgery in Ireland ?—No ; all persons may practise surgery. The only restraint is, that the regular surgeons will not confer with them.

1294. May a person practise as an apothecary in Ireland, without a diploma or license ?—I think not ; I think there is a distinction. The Apothecaries Company have made some regulations.

1295. What is the number of bodies that you think a student in surgery ought to dissect, before his education can be considered complete ?—What I consider a regular course of dissection to be performed during one season, is for a student to dissect every part of the body ; that is, being supplied with half a body for muscles, half a smaller one for vessels, and half a still smaller one for the nervous system. There is every encouragement held out to students to dissect an unlimited number of bodies, and if they can get them, to employ their whole time in that way ; and many students do dissect a greater number than any person is required to dissect, for the purpose of getting a certificate ; and such “extra dissection” is endorsed upon the certificates which I give ; but if were I to express an opinion here, it is, that not one body, nor two nor ten, would give a student the necessary degree of anatomical knowledge ; and I should further say, that no professional man can retain or carry through life his anatomical knowledge ; it must be renewed at intervals.

1296. How many courses of dissection are the students at Dublin required to go through, before they receive their diplomas ?—None. For a medical degree, no dissection is made necessary by the statutes of the university, and the education required in the College of Surgeons in Ireland, consists in serving five years to a master, but no proof of education is made necessary by the charter of the college.

1297. Is not that a system which you think requires alteration ?—A very great alteration indeed, as does the entire plan of medical education in this country.

1298. How many bodies generally are actually dissected by each student frequenting the schools in Dublin ?—At least one each. Many students will dissect three or four in the course of the winter.

1299. Do you mean one in the whole course of their education ?—No, one in the course of one winter.

1300. And how many years do those students who intend to practise in Ireland, generally continue their studies ?—For a surgical diploma five years is the period for their apprenticeship, during which time they are supposed, though not obliged, to be pursuing their studies.

1301. But do they actually pursue their studies during those five years, or are they partly serving behind the counter, or in making up prescriptions ?—Some are industrious, but many spend a large portion of the period of their apprenticeship in idleness

idleness or amusement; their masters do not keep shops, and in general exercise no control over the conduct of their apprentices.

1302. Do you conceive it important that a student in surgery should perform operations upon the dead body?—I do think it quite necessary.

1303. Is that part of the course of study in Dublin?—It is not, except in my own school, and there it is not made compulsory, because I have not the power to do so; but those students who wish to perform a course of surgical operations under my inspection, I superintend without any additional expense to them.

1304. You would advise a promising and aspiring student to perform surgical operations?—Decidedly.

1305. From what part of Ireland is it that the export of bodies has principally taken place to Scotland and London?—From Dublin and from Belfast, but principally from Dublin.

1306. Can you explain how it is that the Irish in England and the Irish in Dublin have been sensitive in so very different a degree upon the subject of exhumation?—I really cannot, and yet I am aware of the fact.

1307. What alterations would you suggest, for the benefit of the study of Anatomy, in the mode of obtaining a supply of bodies?—I have heard of several means being proposed, all of which I should be glad to see adopted; and I believe further, that no one of them would be sufficient of itself. I think it is of the utmost importance that the prejudice and the general feeling of repugnance which people have against dissection, should be conquered, for which purpose this document was prepared. It has been signed in a fortnight, and without sollicitation, by ninety-nine highly respectable persons, and is now deposited in my Museum for the purpose of being signed by greater numbers.

[The Witness then delivered in the following Paper:]

“We, whose names are hereunto affixed, being convinced that the knowledge of Anatomy is of the utmost value to mankind, inasmuch as it illustrates various branches of natural and moral science, and constitutes the very foundation of the healing art; and believing that the erroneous opinions and vulgar prejudices which prevail with regard to dissection, will be most effectually removed by practical examples, do hereby deliberately and solemnly express our desire, that at the usual period after death, our bodies, instead of being interred, should be devoted by our surviving friends to the more rational, benevolent and honourable purpose of explaining the structure, functions and diseases of the human being.”

1308. Are the signatures to that document confined to medical and surgical persons?—No; they consist chiefly of physicians, surgeons and medical students, but include also lawyers, clergymen, country gentlemen and persons of title.

1309. Will you continue your suggestions as to the means of obtaining a supply?—I consider this document of great importance, as it answers effectually the objections which people might have, either to taking the bodies of the unclaimed poor, or obtaining them by exhumation. You never can have an ample supply of subjects from any class of society, except the friendless poor; but I conceive their feelings demand as much to be conciliated as those of any class in society. As a second means I should propose that the law should be repealed with regard to dissection being a part of a murderer's sentence. In the third place I should wish that bequests should be made legal, and if that were the case, I am satisfied that most of the persons whose names are affixed to that document would bequeath their bodies to particular schools under certain conditions, the influence of which on public opinion can scarcely be estimated too highly. In the fourth place I should recommend the getting possession of the bodies of persons who die in hospitals and in workhouses, by the means of secret purchase. An avowed appropriation of the bodies of the poor might excite popular ferment. I should further strongly impress upon the Committee the danger that would attend the making any new laws which would be more penal with respect to exhumation, upon these two grounds; first, with regard to this country, if you fail in getting the unclaimed poor, you have nothing else to depend upon but the system of exhumation; secondly, it is the only system that can be carried on with success in Ireland, for poorhouses are not general in that country, and there are no means of getting the friendless poor, except by raising them out of the grave yards in which they have been deposited by their friends; I do not mean their relations, but their acquaintances or neighbours, who bury them by the subscription of a few shillings for a coffin and for digging the grave.

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1310. Is any considerable proportion of the subjects for the College of Surgeons derived from the hospitals?—No, there is one private school, connected with the House of Industry, where a considerable number of paupers are supported; their bodies have been frequently obtained without publicity, but have always been found insufficient. The greatest number of the poor of Dublin are received into the establishment which has been instituted for the relief of mendicants; but these people sleep at home, not dwelling in the house as in the English poorhouses, and when they die, they are not buried at the expense of the establishment, but by their charitable neighbours. Lastly, I should suggest, as a measure of propriety, the constituting some qualification for teachers, of which there is none at present; and here I wish to observe, that this is not proposed with any view of preventing young men of talent coming forward as soon as they are prepared.

1311. What qualification for teachers would you propose?—It is a difficult regulation to make, but I have thought a little upon the subject, and this is what I should venture to suggest; that every person before he commences teacher, should give notice to some constituted authority, five years previously, that he does so intend, and that at the end of the five years, he should either submit himself to a particular examination for the purpose, or that he should exhibit proofs (if it be anatomy, *manual* proofs, as in France) of his power of making preparations; and also submit to investigation the anatomical preparations, plates, drawings, &c. he may have accumulated for the purpose of teaching with; upon which he might receive a license, and be considered, as in France, an accredited teacher.

1312. Are you not aware that such a limitation would tend very much to impede young men who have just passed through their course of education, from earning an honest livelihood by endeavouring to obtain pupils?—I do not think any body is capable of teaching this science without five years preparation for it.

1313. Does not ignorance of the science professed to be taught, in the teacher of surgery as well as of every other science, soon operate as a check upon the attendance of the pupil?—I think not, because the prices are brought down very often in proportion to the quality of the instruction.

1314. Is not that reduction of the price of teaching common also to other sciences as well as surgery, and is not the imperfection soon discovered, and the low price rendered inexpedient to be paid by the pupil on account of the imperfect knowledge acquired?—I think not; there never has been any period at which so great a number of persons of limited means entered the profession as do now in consequence of the difficulty of making money in any other way, and hence they have always a desire to obtain the necessary certificate, to entitle them to an examination by the College of Surgeons at the lowest possible rate; besides, students are not capable of judging of the qualifications of their teachers.

1315. Some examination is necessary at the College of Surgeons?—Some examination is always employed by the College of Surgeons, and for degrees in medicine also.

1316. Then if imperfect knowledge be permitted to practice, does not the fault rest with the examiners, who apply whatever test to adequate knowledge they may think requisite?—I think not exactly; I think that examinations, unless they were conducted in a different manner, on a very different plan than they are at present in this country, can not prove the persons knowledge, and I may be allowed to form an opinion upon this subject from having been an examiner myself for fifteen years.

1317. Would not it be a more proper course to allow a competition in teaching, with all the advantages which result from that system, and to adopt a more strict mode of examination, than that a limitation should be imposed upon the number or the qualification of the teachers?—I think that the present mode of examination does not ascertain a person's knowledge; if you were to take a medical student to the bedside, and present the patient to him, you could tell what degree of knowledge he had as to the disease, no doubt; or if he were to operate upon the subject, or dissect, in your presence, or make preparations, you could ascertain his anatomical knowledge. I may illustrate this matter by an instance which occurred to me; I was examining a gentleman once upon the functions and structure of the heart, which he seemed to be perfectly well acquainted with; I had a preparation of a heart before me, and I asked him to place it as it really was situated in the breast; but in doing which he showed his total ignorance. The truth is, a person may be made up for a particular examination; every person acquires a mode or style of examining, which those who take the pains of inquiring into are able to become acquainted with.

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with. In the College of Surgeons in Dublin, the examination is open to all the members of the college, who therefore have an opportunity of knowing what questions each examiner puts, and of thus learning the kind of questions usually employed, and in many cases even of predicting the very questions themselves.

1318. But are not the objections which you have just stated, mainly founded upon the inadequacy of the examination, or upon the incompetency of the examiner?—I think all examinations, except practical ones, inadequate.

1319. But why should not practical examinations be rendered requisite, in order to render it an adequate examination?—That would answer very well, no doubt, if it were possible to accomplish it.

1320. What do you mean by practical examination?—I mean, to examine a person in Anatomy, Surgery, and Medicine, by making him dissect before you; by making him produce preparations; by making him operate on a dead body, and by making him stand by a sick bed and prescribe.

1321. If, by any change in the mode of examination, perfect security could be obtained for the public that no incompetent practitioner should profess the science, are you prepared to admit the great advantage of free competition in instruction, as the best mode of giving to students a cheap education?—I do not quite assent to the doctrine of free competition in professions; I think, if you adopt that principle, you must extend it to practitioners as well as teachers, and then you ought to have no examination at all, but let every man practise medicine and surgery who thinks fit, and let the public find out his mistakes, and avoid him.

1322. But is it not safer to guard against the ignorance of the party instructed, by good previous examination, than to allow the public to suffer largely from his ignorance after he has commenced practice?—Yes; but I think it still better to give him a good education, and insist upon his having received it, than to depend upon any oral examination.

1323. You have contemplated a mode of examination which you think would be an adequate test?—Yes.

1324. If that were adopted, what possible objection can you see to the free competition of instruction, when by that mode of examination the public would be guarded against ignorance?—I think that an adequate examination cannot be employed at present, nor ever can, while any obstruction exists to making use of the dead.

1325. How could you know that a good education had been received, without examination?—By spending sufficient time, and going through a particular course.

1326. How are you to ascertain that course has been gone through?—By certificates.

1327. How are these certificates to be granted?—By the teachers.

1328. Are they to grant them after examination?—No; if a pupil attend a teacher, he is bound now to give him a certificate; if the certificates be not false, they are proofs of his having received an education.

1329. Is it found at the universities that certificates of attendance for a given time are certain criterions of the proficiency of the students in sciences, in arts, or in any other subjects which form the studies of a university?—I do not say they are, but I do not think that an examination is as good a test.

1330. Are you not aware that what you have termed practical examination, is the only examination required previous to conferring a diploma at Paris, and, generally speaking, abroad?—I am not aware it is the case at Paris; I believe it is not; in some of the continental schools I believe it is.

1331. Is it not the ordinary rule in the schools of the Continent, that upon practical examination alone degrees and diplomas are given?—I think it is not the case at Paris, unless it has been lately introduced.

1332. In some of the continental schools it is?—In some of the continental schools it is.

1333. You say that a large portion of the students in Dublin amuse themselves?—During the greater part of their apprenticeship.

1334. And still they grant diplomas in the existing system?—They do.

1335. Are those students who amuse themselves, and have not studied, fitted for what you call practical examination?—Certainly not.

1336. If successfully passing through a practical examination were the sole test for the attainment of a diploma, these individuals would not obtain it?—They would not.

1337. Under the existing system they do obtain it?—They do.

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1338. You have stated to the Committee, that in your opinion, notice should be given by any private lecturer, five years previous to his giving those lectures; why do you state so distant a period?—Because I think it is as short a period as any person having once made up his mind to become a teacher upon the subject, can qualify himself in for the purpose.

1339. You have likewise stated, that the person's education should not be less than five years?—It is usually not less; that is a very general time in different parts of Europe.

1340. Are there any clever and studious young men who make themselves perfect in the course of those five years?—Not perfect, but distinguished no doubt.

1341. How long after that period of five years for their education, do you think a person fitted to lecture?—I think five years a very moderate period to prepare himself for teaching.

1342. Then you mean to say, it must be ten years before any young man can venture to teach?—From the commencement of his studies, I do not think it is too much.

1343. How long had you studied medicine before you lectured; had you studied the whole ten years you require other persons to study?—I studied seven years before I thought of practising, and nineteen years elapsed from the commencement of my education before I was appointed to my present office. In the first instance I was but an assistant to Mr. Abernethy, who could have displaced me at any time if I had been found incompetent; I was nominated by the medical officers of St. Bartholomew's hospital to lecture on comparative anatomy and physiology, after they had seen the collection of preparations I had formed for the purpose.

1344. What is the duty of a demonstrator in the London hospitals?—It was to point out the parts that were dissected in the room during one hour each day, which is a thing that an advanced student is sometimes competent to do.

1345. How long had you studied when you became demonstrator at St. Bartholomew's Hospital?—About four years; my reason for mentioning the private lecturers at all was, that I do attribute, in a great measure, the difficulties which exist with respect to the supply of bodies for dissection, to the circumstance of their being too many teachers placed in opposition to each other; I believe, if you had five hundred bodies to distribute amongst five schools, you would find it much more easy to procure them, than if you had the same number to distribute amongst fifty schools, and I feel quite satisfied, that many dissecting schools were established for the purpose of preparing students for examination by the process called *grinding*, which I consider to be extremely injurious to the progress of the science.

1346. Have you any further observation to make upon the subject?—I have only one more observation to add; it fell from one of the witnesses at the last examination, that bodies might be continued to be procured from Ireland in sufficient numbers; now I feel quite sure if the export trade be continued from Ireland, it will extinguish Anatomy in that part of the kingdom, by which this country would be deprived of the beneficial influence which dissection, going on freely in Ireland, would necessarily have on the opinions and feelings of persons in England; I should add, that if facility be granted for transporting bodies from any one part of the kingdom to the other, it would be the means of exciting very strong feelings of indignation in the persons who reside in the place from whence such bodies are taken.

1347. Would not practical examination be a certain preventive against the pupils being prepared by that process which you mentioned, of *grinding*, for the examination requisite for obtaining a medical degree or surgical diploma?—Certainly.

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Mr. Thomas Wakley, called in; and Examined.

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1348. I BELIEVE you are a surgeon?—Yes.

1349. Where do you live?—At 35, Bedford-square.

1350. The Committee understand that you wish to state in what way some of the regulations adopted by the Royal College of Surgeons for examining candidates for diplomas, tend to increase the difficulties of obtaining a supply of subjects for dissection; is that the case?—Yes.

1351. Will you point out, in the regulations of the College of Surgeons, dated the

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5th of January 1828, which are the regulations that so tend to increase the difficulties?—I will read them.

I.—“The only schools of Anatomy and Physiology recognized, are London, Dublin, Edinburgh, Glasgow, and Aberdeen.”

IV.—Regulation.—“The following certificates will be required of candidates for the diploma of the College.”

1st.—“Of having been engaged six years at least in the acquisition of professional knowledge.”

2d.—“Of having regularly attended three or more winter courses of Anatomy and Physiology, and two or more winter courses of dissections and demonstrations, delivered at subsequent periods.”

Section 5.—“And of having attended, during the term of at least one year, the surgical practice of one or more of the following hospitals, viz. St. Bartholomew's, St. Thomas's, the Westminster, Guy's, St. George's, the London, and the Middlesex in London; the Richmond, Steevens's, and the Meath in Dublin; and the Royal Infirmarys in Edinburgh, Glasgow, and Aberdeen; or during four years, the surgical practice of a recognized provincial hospital, and six months at least the practice of one of the above named hospitals in the schools of Anatomy.”

1352. Will you state in what way you consider these regulations to interfere with the supply of subjects?—If I were to do that, it would be only offering my opinion; perhaps you will allow me to state the facts as they have occurred since 1819 or 1820. In 1815, and from that period to about 1822, there were very few difficulties experienced in this town with regard to obtaining an adequate supply of subjects for dissection. In 1823, the College of Surgeons in Lincoln's-Inn Fields enacted a bye-law, stating, that certificates of dissection would not be received by the Court of Examiners, unless the dissections were performed during the winter season; this bye-law had the effect of drawing the pupils from every part of England for the purpose of cultivating the science of Anatomy to that extent which would enable them to undergo their examination for the diploma. In consequence of the extraordinary flow of students into London, at that period, the dissecting rooms became very much crowded with pupils; as there was an increased demand for bodies, an increased price was asked by the resurrection men, and ultimately the price became so exceedingly high, that a number of individuals, who before had not embarked in the practice of exhumation, entered upon it; bodies were raised and procured for a time in the most indecent manner, and at last the churchyards and every description of burial ground in the neighbourhood of London were so watched, that to obtain any subjects for the purpose of dissection, was next to impossible. In 1824, the College enacted the Bye-law N° IV. section 5, in which it was further stated, that, “No certificates in testimony of attendance on dissections would be received by the Court, except from the appointed professors of Anatomy and Surgery in the universities of Edinburgh, Glasgow, Aberdeen, and Dublin, or from persons who were physicians or surgeons to the hospitals in the recognized schools, or from persons unless recommended by the medical establishments of those hospitals.” This regulation had a most extraordinary effect upon the private schools in this town, and I have the authority of Mr. Brookes for stating that it was nearly his ruin. I have further the authority of Messrs. Brookes and Carpue (whom I have seen since I received the summons of this Committee) for stating that previously to 1823 (comparatively speaking), they experienced no difficulty in obtaining subjects; but the College of Surgeons having limited the space from which subjects should be procured to London, and the time in which dissection should be performed, to seven or at most eight months in the year, the difficulties of procuring subjects had increased to such a degree, that their rooms were often unfurnished with the requisite materials for prosecuting the study of Anatomy. I have the authority of both of these gentlemen for stating, that in the summer they could always obtain subjects for dissection with greater facility than in the winter. The ascribed motive of the College for enacting the law restricting dissections to the winter season, “In consequence of the manner in which dissections in the summer endangered the lives of the students,” does not appear to be the real one. As Mr. Brookes has lectured during the summer season, from fifteen to twenty years, without having had a single pupil die from the practice of summer dissection; and during the whole of his experience he has lost but one pupil from dissection, and that pupil died at Christmas. Mr. Carpue also has practised summer dissections nearly twenty years, and he has not lost a single pupil. It will have been already perceived that the bye-law passed in 1823, and that passed in 1824, had the direct tendency of throwing all the fees

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which could arise from teaching of Anatomy in this country, into the pockets of the London hospital surgeons, and their immediate dependents and relatives; and it is not a little singular that the members of the Court of Examiners, by whom these bye-laws were enacted, were themselves, at least seven of them, London hospital surgeons. These laws, continuing in operation at the present time, produce the same mischievous effects with regard to the cultivation of Anatomy as at the period when they were first enacted. Before they were enacted, dissections were practised anywhere, and certificates were received without any specifications as to the time or place, *in* which or *at* which the dissections were performed; every body that could be obtained, was invariably applied to the purposes of dissection, and eagerly sought after by the professional men, not only of London, but of every part of the kingdom; and students as easily answered the questions proposed to them in their examinations at the college, at that period as at present. Certificates not being received by the Court of Examiners from any part of England, except London, all the pupils necessarily resort to this place; consequently the chances of an adequate supply of subjects to meet the increased demand have of course been, and really are very much lessened. The Court of Examiners appear chiefly to rely on the *certificates* of students as the most important proof of ability; but at the period when these bye-laws were enacted, and subsequently to that period, there was scarcely a subject to be procured for dissection in the anatomical schools of this metropolis; yet the Court of Examiners required from the pupils certificates of dissections which had never been performed. To show the fallacy of relying on certificates as a proof of the quantity of dissections accomplished, I may instance an occurrence which happened to myself. When about to apply for examination at the College, I was asked by a fellow-student what number of certificates I had to take with me, and I told him very few; on which he said that was a pity, because the examination was generally proportioned to the quantity of certificates produced by the pupil. I mentioned to him that I had entered to one lecturer at a distant part of the town when I first came to London; but finding it inconvenient to attend, after three or four mornings, I relinquished the attendance; of course, I said, I could get no certificate from him. "You had better try," he replied; "I think you can." Accordingly I did apply, and received a certificate from the lecturer, stating that I had "regularly and diligently" attended one course of his lectures on Anatomy, Physiology, and Surgery, and one course of his dissections, although I had attended but four or five of his lectures, and no dissection whatever. The effect of the bye-law to which I have already alluded, directly tends to destroy the value of certificates, because from the manner in which it has crowded the anatomical theatres and dissecting rooms, it is utterly impossible for the lecturer to know whether the pupil has been attentive to his studies or not. Subjects, up to the period of 1823, before the *winter courses* of dissection were required by the College, could be procured almost without difficulty, and to any extent, at four guineas each; but since that period, many of the dissecting rooms of this town have been weeks and even months without a subject; yet in the summer, when the lectures are altogether prohibited, or at least not recognized by the College, subjects are procurable with the greatest facility, and at the same price as formerly.

1353. Have you any further observations to make upon the regulations you have pointed out?—A petition now lies on the table of this Honourable House from the great body of surgeons, praying for the repeal of the regulations in question on account of their injustice towards country surgeons in the large provincial hospitals, as they have had the effect, or nearly so, of entirely putting a stop to the teaching of Anatomy in the country; that petition was presented to the House the year before last.

1354. Have you any observations to make upon article 5. of Bye-law N° IV.?—That clause recognizes the attendance of pupils on the practice of the hospitals of "St. Bartholemew's, St. Thomas's, the Westminster, Guy's, St. George's, the London and Middlesex, in London; the Richmond, Steevens's, and the Meath, in Dublin; and the Royal Infirmaries in Edinburgh, Glasgow and Aberdeen, or during *four years*, the surgical practice of a recognized provincial hospital." The manner in which this regulation is calculated to crowd the hospitals of London, and to draw off the pupils from the provincial institutions, where they have equal, if not greater opportunities of acquiring professional knowledge, may be understood by the fact, that although *one year's* attendance is deemed sufficient at the Westminster Hospital, *four years* attendance in a provincial hospital is required; yet the Westminster Hospital contains only 82 beds, while some of the provincial hospitals contain

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contain upwards of 300; still the required attendance at the Westminster Hospital is only a fourth of the period required at the others; but two of the four surgeons of the Westminster Hospital are on the Court of Examiners, and the whole four are members of the council from which the Examiners are elected.

1355. Is not the winter, of necessity, a period more fit for dissection than the summer, on account of the rapidity with which the subjects become unfit for examination?—I think not, to the extent generally believed; because, with proper care and attention, subjects can be preserved with antiseptics, for all the purposes of dissection, nearly as well in the summer as in the winter season. I have this morning seen a subject at Mr. Carpue's, with the muscles still on the bones, which has been dissected upwards of one year, and I cannot say that it is offensive even now.

1356. Before the College passed the bye-law admitting only attendance at winter courses of lectures, did as many pupils attend the summer as the winter courses in London?—There is a difficulty in answering that question, because many of those lecturers who lectured in winter, did not lecture in summer.

1357. But although the same lecturers did not lecture in the winter and the summer, was the attendance upon the summer lectures as great as upon the winter lectures?—Greater, at least with Mr. Brookes; but that gentleman and two others were, I believe, the only lecturers in the summer.

1358. Was the number of lecturers who lectured in the summer less than the number of those who lectured in winter?—Far less.

1359. Therefore, upon the whole, the number of pupils who attended summer lectures was less?—It was less.

1360. When it was equally open for pupils to receive certificates for their attendance at summer as well as winter lectures, to what do you ascribe the greater number attending the winter courses?—It was a matter of greater convenience. The medical sessions commenced in October and terminated in May, and for many years there was only one lecturer to any extent in the summer, and that was Mr. Brookes, whose theatre was always full. Whilst I was at St. Thomas's Hospital, Sir Astley Cooper, at the end of his course, invariably recommended us to go to Mr. Brookes's during the summer season, if we wished to learn Anatomy.

1361. Were the other lectures which are usually attended by students upon Materia Medica and Physiology, given in the summer months?—In summer and winter also.

1362. You stated, that the pupils receiving certificates from various lecturers formerly passed their examinations at the College as easily as at present; does not the facility with which they pass depend as well upon the strictness of the examiner as upon the qualifications of the examinee?—Unquestionably; but with one or two or three exceptions at most, the same examiners formed the court then as at present.

1363. Do you apprehend the examinations were as strict then as they are now?—I have no means of knowing; they cannot be less strict. I had no question whatever in Anatomy proposed to me when I was examined.

1364. In what year was that?—In the beginning of the year 1817.

1365. Were you required then to procure certificates?—Certificates of this kind (*producing one*), as to lectures and dissections, without stating where the former were attended or the latter performed. This is the certificate, Mr. Carpue informs me, he was in the habit of giving at that time.

1366. It does not state how many courses or the length of each course?—No.

1367. Do you not consider, that in one respect the present regulations are better than they were formerly, inasmuch as they require to be specified the number of courses of lectures on Anatomy and dissection that the candidates for diplomas have attended?—No; I think they are much worse, because they compel the student of talent to devote as much time to the study as they do the student of extreme dullness, who might require a period five times as long.

1368. If the Committee correctly understand the nature of your answer, you would not recommend that the time during which the pupil has attended dissections should be any qualification; you would desire that the knowledge of the pupil should be ascertained, at the period of his presenting himself, by a more strict course of examination?—Certainly; I would neither require that the time the pupil had attended, nor the place where he had attained his information, should be specified; I conceive that every thing should be made to depend on an efficient, practical, public examination.

1369. Are all the private lecturers, who now give lectures on Anatomy or a course of dissection in London, accredited by the medical establishments of recognised hospitals?—

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hospitals?—That is a question I cannot answer. The bye-laws have been altered annually these five years last past.

1370. I do not observe in this copy of the regulations, dated the 5th of January 1828, the same limitations which are found in the copy dated February 1826. It is not stated in the copy, bearing date the 5th of January 1828, "That certificates of attendance at lectures on Anatomy, Physiology, theory and practice of Surgery, and the performance of dissections, be not received by the Court, except from the appointed professors of Anatomy and Surgery, in the Universities of Dublin, Glasgow and Aberdeen, or from persons teaching in a school connected with or accredited by the medical establishment of a recognized hospital in one of the schools of Anatomy, or from persons being physicians or surgeons to any of such hospitals"?—No, it is expunged; and the certificates of a gentleman who is present, are now received by the Court of Examiners; although they were refused by the Court of Examiners in 1823, 1824 and 1825.

1371. Then you believe the certificates of private lecturers, although not accredited by the medical establishments of the hospitals, would be now received?—Yes.

1372. You stated, that this morning you saw a subject which had been dissected a year ago, and by the use of antiseptics, the muscles still remain on the bones; is that mode of preparation generally known?—I believe not; but the only means used to preserve it, is common salt. It was at Mr. Carpue's. He had one subject also dissected about a fortnight, and in that, the muscles and other parts were quite perfect, and almost free from smell.

1373. Do you think, that if subjects could be procured in a sufficient quantity from the Continent, and if prepared in the manner just described, they would be fit subjects for anatomical purposes?—Yes; but I think we can obtain without difficulty, much better subjects *here*, and without violating any of the feelings or prejudices of the public. I believe that not more than from 500 to 700 subjects are wanted for the purposes of dissection in any one year, and I consider there are more than 1,000 unclaimed persons who die in our public institutions, such as hospitals, work-houses and prisons, during the same period. If we were to rely upon a foreign source, in the event of a war, the supply would be instantaneously cut off. If on the other hand, we were to have the bodies of unclaimed persons for dissection, we should be certain of an abundant supply; and there would be no outrage to public feeling, because people are quite indifferent, as long as the subjects are not their own relatives or friends. The great prejudice which exists in this country against the practice of dissections, appears to arise from that enactment of the legislature which consigns the bodies of murderers to dissection; also from the disgusting and filthy practice of exhumation, which employs, I believe, nearly 100 men, who are continually violating both law and decency.

1374. Since the number of pupils attending the winter courses has at all times been considerably greater than the number of those attending the summer courses, should you anticipate much diminution of the scarcity of subjects now existing, provided certificates from the summer courses were admitted?—Certainly not, if London is still to be the only school of Anatomy recognized in England.

1375. Should you anticipate any considerable diminution of the scarcity, if certificates from provincial lecturers were admitted more freely?—Certainly, a very great diminution, if the period of attendance on the provincial hospitals were reduced to the same standard as that on the hospitals of London.

1376. Under the present regulations, is the period of attending the provincial courses required to be double that required to be in the London schools?—Certificates of attendance on provincial lectures on Anatomy are not admitted at all; but the period of attendance in country hospitals on surgical practice, is four times as long as that required in the London hospitals.

1377. In the regulations, dated February 1826, this passage occurs; "Of having diligently attended during the term of at least one year, the surgical practice of one of the following hospitals;" and then follows a list of the London, Dublin, Edinburgh and Glasgow hospitals, "and twice that term in any of the provincial hospitals as above described;" the above hospitals, meaning such hospitals as shall contain on an average, 100 patients?—Strictly speaking, that regulation amounts to an exclusion of the Westminster hospital, although you will perceive in Regulation 5, it is recognized.

1378. How is it that the period of attendance, as described by you to be required in the provincial hospitals, is four times the period that is required in the London hospitals?—

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hospitals?—I cannot say; but the demand is contained in the last copy of the regulations, dated the 5th of January 1828. The regulations were altered in 1827. They then stated, that certificates of a two years attendance in a provincial hospital would be received by the Court, provided the pupil had previously attended two courses of lectures and two courses of dissections in one of the recognized schools, London being at the same time the only recognized school in England.

1379. Do you happen to know how many patients there are in the hospital at Leeds?—I do not; but I should think from two to three hundred; at Manchester there are about three hundred.

1380. Are you aware of any reason why so much longer a period should be required for walking the country hospitals?—None whatever; unless it be that it favours the examiners themselves. Indeed it is generally considered that where there are only a few pupils, they have a better opportunity of acquiring information than where there are many.

1381. You think then that a shorter time would be requisite in the country than in London?—I do.

1382. Are you aware of the following being the bye-laws of the College of Surgeons in London, as long ago as the 25th of February 1819:—1st. Candidates must have certificates, first, of having been engaged for five years at least in the acquisition of professional knowledge; 2d, of having regularly attended two courses at least of anatomical lectures, and also one or more courses of surgical lectures in London, Dublin, Edinburgh or Glasgow?—I am aware of some such regulation having existed.

1383. What is the reason for the different footing upon which Aberdeen and Dublin are put from other country hospitals?—I cannot say; the Royal Infirmary of Aberdeen is very inferior as a school of surgery to many of the non-recognized provincial hospitals.

1384. Are they on the same footing as the London hospitals?—Yes.

Edmund Belfour, Esq. called in; and Examined.

1385. WHAT office do you hold?—Secretary to the College of Surgeons.

1386. Have you heard the evidence given by the last witness?—Yes.

1387. Do you now wish to give any explanation of the course pursued by the College of Surgeons?—Mr. Wakley stated, that till lately certificates of dissection were received from schools in the country, and not confined to London, and he attributes the difficulty of procuring subjects to that regulation; the provincial schools are so far recognized, that all lectures required by the late regulation of the College of being attended by candidates, may be attained in the provincial schools, with the exception of Anatomy, and one course of surgery is required to be in London.

1388. Is it the case that the attendances on the courses of all private lectures are admitted?—There is no instance in which it has been refused; there is one instance that recently occurred; a very young man has commenced lectures and wrote to the Court to know whether his certificates would be received, and the reply was, after he had delivered one course, his application would be taken into consideration; I would add, that the examinations are infinitely more strict now, than they were before.

1389. You say a person attending country lectures in different branches of medical science, with the exception of Anatomy, are received?—Yes; they are required to attend one course of lectures in London.

1390. Are such persons received, having gone through the same period of lectures, as if they had done so in London, or would they require a longer time?—Not of lectures; hospital attendances they do.

1391. What difference of period is there between hospital attendances in London and in the country?—The regulations point that out; four years for one and one year for the other.

1392. Why are lectures upon other subjects recognized and not lectures on Anatomy?—Because it has been found impossible to teach Anatomy in the country; and I need not remind this Committee of the uproars in which individuals have involved themselves in attempting to teach Anatomy in the country.

1393. Is it not because they cannot obtain the requisite subjects?—Yes.

1394. Would not the best cure for that imperfection of provincial schools be, to make the examination of the College so strict that no person should pass without having acquired a competent knowledge of his profession?—They do not now pass until they have undergone such an examination.

Edmund Belfour,
Esq.

Edmund Belfour,
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C. D.

1395. If a person can pass in a competent manner, what reason can there be given why he should not receive his diploma, in whatever part of the world he may have studied?—I am not enabled to answer that question; I refer to a competent anatomist to answer that question.

C. D. called in; and Examined.

1396. I BELIEVE, for several years, from 1809 to 1813, you had the sole supply of subjects to the anatomical schools in London?—I had.

1397. Will you state to the Committee what was the number of subjects you supplied to the anatomical schools in 1809 and 1810?—The number in England was, according to my book, 305 adults, 44 small subjects under three feet; but the same year, there were 37 for Edinburgh and 18 we had on hand that were never used at all.

1398. Now go to 1810 and 1811?—Three hundred and twelve.

1399. Adults for that year?—Yes, and 20 in the summer, 47 small.

1400. 1811 to 1812?—Three hundred and sixty in the whole, 56 small ones; these are the Edinburgh ones and all.

1401. Go to 1812 and 1813?—The following summer there were 234 adults, 32 small ones.

1402. At what price, on the average, were those subjects delivered?—Four guineas adults, small ones were sold at so much an inch.

1403. Was this supply ample for the wants of the schools at that time?—Certainly, and more than they wanted.

1404. What was it that made you discontinue in 1813 from supplying the schools of Anatomy?—Why there had been trouble with men going out; the lecturers got to supply strange men, and that was the cause of a great deal of trouble.

1405. Did you ask the lecturers to give you a greater price than they had been in the habit of giving you, and did they refuse to do so?—Yes, we did, and they did so.

1406. Were you in the habit of sending many bodies to Edinburgh?—We were every year in the habit of doing so.

1407. Did you also supply other schools of Anatomy in the country?—Yes; we used sometimes to send subjects to Bristol and other places.

1408. Were the profits of this business more than ample to allow a man to live comfortably by it?—Certainly not.

1409. What plans have you proposed to professional gentlemen in order to afford them a constant and regular supply of the necessary subjects?—Why, the plans I formerly proposed, when they found there was a difficulty of supplying subjects, were, to have the bodies of men that were convicted of offences and died in gaols, to be delivered to the surgeons for dissection; also the bodies of convicts executed.

1410. In your opinion, do the men employed in raising bodies from the graves make that employment a pretence often for other occupations?—They do, certainly.

1411. Of what other description?—Thieving; *thieving*, most unquestionably; but I have never been with them when they have committed any other offences than raising the bodies, of course; but I am sure it is so.

1412. Do you, in your opinion, conceive that you could obtain an ample supply of subjects for the use of the anatomical schools, by importing the bodies from abroad?—It is doubtful, and for this reason; I might not be able to get a sufficient number of bodies from any one place at a time, to import them, and it would not do to be going from place to place.

1413. Suppose the government on this side of the water were to interfere, and remove all difficulties, do you think you should be able?—I think so.

1414. From what quarters?—From the Netherlands and from Holland.

1415. You state you think you could get the supply, provided the British government removed all obstacles on this side the water?—No, on that side.

1416. By consent?—Yes, by regulations with the other government.

1417. Do you think there are any difficulties at present imposed by the governments on the other side?—I think not; they have very little prejudice indeed; formerly the boxes and packages were never leaded, never sealed; in France, they are now.

1418. Have you ever imported any bodies from abroad?—Not bodies; I have imported several curious anatomical specimens, and I have several now, such as separated heads, and things of that sort; they are all imported from Paris; I never bought any in the Netherlands.

1419. Now suppose that you could once again be (as you were formerly) the only one

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one who supplied the London surgeons with subjects, what is the course you would take to accomplish your purpose?—The course I should take would be to have the workhouse subjects; we can get them out of the burial-ground without any difficulty whatever; I am satisfied that there are three or four workhouses that would supply every subject that would be wanting; that was the point I laid down before an Honourable Member who consulted me, but he would not consent to it.

1420. Is it not a common course, for resurrection men, in order to obtain bodies from workhouses, to claim them as the bodies of relatives?—I believe it is constantly done; I never did so myself; I did *attempt* it once myself, but was detected; it was at St. John's, and we should have obtained the body, but a committee was sitting that evening of the parish, which was sitting at the workhouse where the body lied to be owned; the constable happened to come into the workhouse at the time, and he knew me, and that prevented it; or else we should have certainly had the body.

1421. Do you not believe many bodies are now obtained in that way?—No doubt they are, and out of hospitals as well; it did not use to be so, when we could get a plentiful supply.

1422. Have you made any inquiries yourself, from which you are enabled to inform the Committee what is the number of subjects that would now be wanted for the use of the anatomical schools in London?—Four hundred would be more than a sufficient supply; I mean adults; with respect to small subjects, it is all chance.

1423. Do you know that the number of dissecting pupils is now as high as 600 or 700 in a season?—Yes.

1424. And has much increased since the time when you had the supply?—Why yes; I left off in 1820; to be sure I did go out at different times afterwards, but then we had our men shot away from us, and it was very dangerous; on one occasion one man was shot in four places, and we took him away with us; to be sure, I had never gone out with him before, and he was an incautious hand; he came and told us where the body was to be got, and we went with him.

1425. Now since you have left off, have you not understood that the risk in going out has very much increased?—Yes, it has; and we always left the grave open if we found the body gone.

1426. With what view did you leave the grave open?—That the ground should be completely spoiled, and that it should be no benefit to them or to us; nothing but opposition.

1427. Why that would defeat the mutual objects?—Yes, but it was not fair in a case where life was at stake; life was at stake, you know; if I went into the ground after a body was gone, a watch might be set, and I not know it.

1428. Have you had any communication with an eminent surgeon on this subject?—As regards an eminent surgeon, I proposed to him that our men should produce as many bodies as could be used, if each student paid six guineas on his entrance—as many as they should want; that proposition was refused, on the ground that it was rising the price.

Veneris, 23^o die Maij, 1828.

The several Petitions referred to this Committee since the 28th of April, were read.

F. G. called in; and Examined.

1429. C. D., a person who has been before the Committee, and with whom you have been connected in business, has informed the Committee what was the number of bodies with which the schools had been supplied from 1810 to 1813; will you state to the Committee, whether the bodies so raised, amounting on an average annually to above 300, consisted principally of the bodies of rich or poor?—Both classes; but we could not obtain the rich so easily, because they were buried so deep.

1430. But what did the greater proportion consist of?—There is a greater number of poor.

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Mr.
William Aldous.

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Mr. *William Aldous*, called in; and Examined.

1431. WHAT situation have you held in St. James's parish?—Overseer.
1432. Have you been much troubled with exhumation in that parish of late?—I believe not; I have not heard of it.
1433. Have you heard of its taking place in former years to any extent?—Yes, I have heard so.
1434. If there were any means for supplying the surgeons with subjects, without being compelled to have recourse to the exhumators, would not such a change be considered very desirable by the parish officers?—Very desirable.
1435. Is not the parish put to very considerable expense in employing extra watchmen at high wages, for the purpose of keeping off resurrection men?—Yes, there is an extra watchman employed to protect the burial ground at night.
1436. What objection do you think the inhabitants of the parish would feel, provided they were assured that the object was to do away with the practice of exhumation, to the bodies of those who died in the workhouse and were unclaimed by any friends or relatives, being given up to the surgeons for dissection?—I should think the objection would arise in their minds, that the bodies were not buried; but if they had security that the bodies would be buried in a proper and customary way, I should say there would be no objection to those particular bodies being delivered up.
1437. If they felt secure, after dissection had been completed, that the bodies were to be buried with proper funeral rites, and if at the same time they were satisfied that exhumation would be superseded by the change, you do not think they would object to the particular bodies adverted to, being given up?—I should say, most decidedly not.
1438. Would you not think it right in such cases, that the surgeon should be required to pay all the expenses of the burial, and give security to the parish that the burial should actually take place?—Yes; should actually take place in the parish which gave up the body.
1439. Such a change would be a material relief to the parish funds, would it not, if the surgeons bore the expense of the burial of such persons?—A very great relief in many parishes; much more than in ours; we have very few in proportion to some other parts; our parish being central, the casualties are not so great as in the parishes at the outskirts of the town, which strangers have a claim upon when they come to London. St. James's they have no claim upon, and do not get relief unless actually taken in, and belong in that sense to the workhouse, and die there.
1440. Can you state what the expense of burial is, including the different fees, and the expense of the coffin also?—Not exactly.
1441. About how much?—From twenty-five to thirty shillings probably.
1442. So that if the surgeons deposited 2*l.* with the parish, and further gave any security that the parish might require, that the body after dissection should be returned to the parish for burial, you cannot see any objection to such a plan?—My opinion is, if the surgeons were to make a deposit to the parish sufficient to pay for a proper coffin, the body might be taken away in that coffin, with a security that it should be interred in the ground belonging to the parish; and to be carried for burial from the place of dissection, would be better than bringing it back again to the workhouse or establishment from whence it was taken.
1443. Might it not tend to reconcile the parishioners still further to the change, if the surgeons were to pay something more than the burial expenses to the parish for the purpose of being distributed amongst the poor of the parish?—I should think the parish would not require that or be more satisfied; the parish officers of course do not want to make a profit of anything of that kind.

Mr. *Richard Spike*, called in; and Examined.

Mr.
Richard Spike.

1444. YOU are a select vestryman of the parish of Saint James's?—I am.
1445. Have you served the office of churchwarden?—Yes, and overseer also.
1446. Have you been much troubled with exhumation either in former years or at the present time in your parish?—Not more than parishes generally are, I believe.
1447. Have you ever found it necessary to employ extra watchmen at high wages for the purpose of keeping down the practice?—Yes, we have in St. James's parish.
1448. I suppose that is no inconsiderable expense?—On the contrary, it is a very large expense.

1449. But

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1449. But in spite of all precautions that can be taken, bodies, I suppose, are occasionally removed?—Yes; while I was churchwarden, we were obliged to raise a wall, which was 16 or 18 feet high; we were obliged to increase it 12 feet, because with all the vigilance we could use, persons were continually entering the church-yard.

1450. Where is it situated?—In the Hampstead road.

1451. Do you believe that the practice still goes on?—I cannot speak as to my own knowledge, but I have not the least doubt of it.

1452. I mean with regard to St. James's?—Yes, for this reason; we found it did go on, notwithstanding the twelve-feet paling we added to the wall, and as the wind blew the paling and injured the wall, and as we could not prevent the practice, rather than the wall should be pulled down by the paling, we took it down.

1453. Suppose any mode could be devised of supplying the dissecting schools with bodies, so that the practice of exhumation could be superseded; would it not be considered as an advantageous thing by the parishioners in general?—I should think so; decidedly so; for my own part I am sure it would.

1454. What do you think would be the feeling of the parishioners, provided they were satisfied that it was to be the means of superseding exhumation, about giving up to the dissecting schools the bodies of those persons who die in the parish workhouse or infirmary, and who have no friends or relatives to claim them?—I do not think the parishioners would give themselves any trouble to think about it at all; I think it would be a matter of perfect indifference to them.

1455. Do you think they would regard it totally with indifference, provided they were satisfied these were the means of allowing the bodies of their own relatives and friends to rest in peace?—Certainly, I should think so.

1456. Do not you think they would be rather pleased and gratified with the change, provided that was the result?—That is my feeling.

1457. Supposing the dissecting schools, whenever they received a body under those circumstances from the parish, were to pay the burial fees and the expense of burying the body, would not that tend materially to relieve the parish funds?—Certainly it would.

1458. Would not that the more tend to reconcile them to the proposed change?—I think they would want very little reconciling to the thing itself.

1459. From your experience of the feeling of that part of the public which dwells in Saint James's parish, do you feel satisfied that no material opposition would be made, at least in that parish, to the introduction of any such measure?—I do.

1460. You do not anticipate any opposition on the part of the parish officers to the proposed change?—I cannot say that I ever conversed with them upon the subject; but I should say decidedly not.

1461. Is it already the practice in your parish to allow the parish surgeon to examine the bodies of those who die in the infirmary?—Yes, and has been for years; there have been lectures given upon them, and it never met with any thing to call opposition; some objection was made to its being turned into a lecture room at one time.

1462. Even supposing in the first instance, there was to be a little opposition to the measure, do you not think after a short time the public would become reconciled to it?—I do not consider that there would be any opposition.

1463. Is there any thing further you would wish to state to the Committee upon the subject now before them?—No.

1464. What is your opinion with respect to the feelings of those who may be considered as more peculiarly interested in this question; the feelings of the poor themselves?—I think, with regard to their friends, they take very little account of them after death; it happens sometimes, it is true, that their friends come forward and claim them, and seem very much affected and broken-hearted, but the instances of that kind are very rare; it has certainly always struck me, that generally when dead, their friends do not care what becomes of them.

1465. Does it not sometimes happen that relatives or friends are personated by resurrection men?—I really cannot say, from my own knowledge, but I think so; it is done for the purpose of making a profit of them.

1466. And then they take them away.—Yes.

1467. Do they not sometimes get a sum of money from the parish for the alleged purpose of burying the bodies?—Sometimes; but the parish do not always give it, because they are aware of the trick.

1468. In most cases the parish do not give a sum of money to the persons who

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want to take them away for the alleged purpose of burying them; but bury the bodies themselves?—Yes, they do.

1469. In many cases, do not relatives simply content themselves with coming and enquiring whether the parties be dead or not, and having satisfied their curiosity, they take no further trouble about the matter?—Yes, a great many; sometimes when we know the residence of a party, we send to let them know that such a person is dead; but they frequently do not give themselves the trouble to come after them.

1470. In every case, supposing a body to be given up to the dissecting schools, would you not consider it right that the teacher of the dissecting school should engage to give funeral rites and decent burial to the body in the parish from which he received the body?—I think so for two reasons; in the first place, that persons who would call themselves relatives, might be affected by knowing a body was uninterred; and again the clergyman of the parish would not be deprived of his fees.

1471. You conceive it to be probable, that in the case of people dying in the workhouses and hospitals, persons come forward and personate the friends of the party dead, claim the body, receive money from the parish for burying it, and then do not bury the body, but sell it for dissection?—I am disposed to think that is the case very often; I cannot say that I know it of my own knowledge, but I have no doubt it is very often done.

W. Lawrence, Esquire, again called in; and Examined.

*W. Lawrence.
Esq.*

1472. WILL you state whether any cases have occurred within your knowledge of medical or surgical men having been made liable for damages in civil actions for injudicious treatment of patients under their care?—Several instances have occurred of surgeons having been the subject of actions of that kind, in which damages have been recovered against them.

1473. Those persons have not been considered as escaping liability to such actions, who have received regular diplomas?—The cases that I have referred to are those of persons who had received regular diplomas from the Royal College of Surgeons of London.

1474. Would you consider it invidious to state the instances?—I will specify two instances of accidents of the shoulder-joint, in which the surgeons in attendance had failed to recognize the existence of dislocation, and had consequently omitted to reduce the dislocated bone; so that the patients would remain crippled for life.

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APPENDIX.

Appendix, N° 1.

Appendix, N° 1.

LETTER from College of Physicians, Edinburgh, dated 18th April 1828, to the Right Honourable Robert Peel.

Sir,

Edinburgh, 18th April 1828.

THE Royal College of Physicians of Edinburgh, having agreed unanimously to petition the Legislature on the subject of granting facilities to the prosecution of Anatomy, request me, in absence of their president, and as convener of a Committee for that purpose, briefly to mention to you the modes by which, as they conceive, the wished-for relief may be effected. They are aware of the prudence and caution required, in discussing the matter before the public; and accordingly in their petitions to be presented to both Houses of Parliament, by my Lord Melville and Mr. William Dundas, have simply alluded to their conviction of the practicability of devising adequate remedies. It is to those, they now venture confidentially to solicit your attention, under the hope, that, should the appointment of a Committee of Inquiry, receive the sanction of His Majesty's Government, you will recommend them for consideration, as proceeding from a society to whom the magnitude of the evils complained of, is necessarily well known, and by whom a good deal of anxiety has been long entertained as to the means of obviating or lessening them.

1.—The repeal or mitigation of the law under which the possessor of a dead body, though obtained by purchase or otherwise, from persons with whom he is in no degree connected, and of whose conduct, supposing it criminal, *quoad* the body, he is entirely ignorant, may be subjected to fine or punishment, as a perpetrator in, or encourager of their delinquency.

2.—The abolition or restriction of the power assumed by various petty officers, to break open boxes and packages in which it is alleged dead bodies are conveyed from one place to another, and also unnecessary intrusion into premises in which for the purposes of professional education, dead bodies are usually or frequently contained.

3.—Authorizing officers of Excise or Customs, on proper application, to grant permits for the transportation, debarkment and conveyance of dead bodies, liable to examination, if judged requisite, so as to prevent smuggling anything contraband.

4.—Making it competent to municipal and other functionaries, under certain regulations, to grant for dissection, to recognized and established teachers, the bodies of persons found dead on the roads and streets, in rivers and canals, or the sea shore, in almshouses and elsewhere, if not claimed within hours from the period of discovery; as also the bodies of foreigners, strangers and others, dying at inns, lodging-houses and public institutions, in the absence of friends, and without visible means of defraying funeral expenses.

5.—Legalizing the sale and purchase, or bequest during life, of dead bodies, on the common principles affecting property.

6.—The repeal of that part of the criminal law by which, from a just indignation at the commission of murder, the bodies of those convicted of it were given for public dissection; the usual, though it may be observed, effect of which is, to bring odium and abhorrence on an essentially beneficial process.

7.—Familiarizing mankind to the utility and advantage of anatomical inquiry, by enforcing the examination of the bodies of all who die suddenly and without obvious cause; an enactment similar to what is recognized in England, though not so fully as is suitable, and the benefits of which, from the want of coroner's inquest, are totally unknown in Scotland, unless in cases of criminal prosecution.

The College are humbly of opinion, that all of these proposed modes are practicable, and that their combined operation would be sufficient for the purposes of science and instruction.

I have the honour to be, Sir,

Your most obedient humble servant,

Alex. Monro.

The Right Honourable Robert Peel,
Secretary for the Home Department, &c. &c. &c

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Appendix, N° 2.

LETTER from the Chairman of a Committee of the Royal College of Physicians, dated Edinburgh, 26th May 1828, to Henry Warburton, Esq. in explanation of some particulars in the foregoing Letter.

Appendix N° 2.

Sir,

Edinburgh, 26th May 1828.

AS Chairman of a Committee of the Royal College of Physicians, appointed this day, to return an answer to your letter to Dr. Monro, of date the 21st current, I beg to inform you, that the College wish to offer a short explanation of the 4th and 5th suggestions made by Dr. Monro, in his letter to Mr. Peel, of the 18th ult.

It may probably be thought, that in the case of alms-houses and hospitals, it may be left to the managers of such institutions to fix the time when the appropriation of unclaimed bodies may be authorized; but, as this is the source from which the greatest expectations of a supply of subjects, without recourse to the revolting practice of exhumation, may be entertained, the College consider it of the first importance, that, after a certain time has elapsed, the managers of all such institutions should be authorized to grant, for the said purposes, the bodies of all persons unclaimed, and whose interment would necessarily be a charge on the institutions from which they had derived benefit.

In regard to the suggestion of legalizing the sale of bodies, the College are anxious, that, if their proposal be favourably considered, it should of course be understood to apply only to the case of individuals selling, during their lifetime, the right and disposal of their own bodies after death, and receiving the money themselves. For, if the sale of the bodies of relations, connections or others, were authorized, the College think, that a greater inducement than the law ought to sanction, would be thereby held out, among the numerous needy and profligate individuals in the lower ranks of society, to the neglect of sick persons, and might even lead to the actual commission of murder.

With these explanations, the College approve perfectly of the different suggestions contained in Dr. Monro's letter; and are quite willing to allow it to appear in the Report of the Committee, of which you are chairman, as the result of the best consideration which they have been able to give to the subject.

I have the honour to be, Sir,

Your most obedient humble servant,

Th. Spens, M. D.

Henry Warburton, Esq. M. P. London.

Appendix, N° 3.

REPORT of the Committee appointed by the Royal College of Surgeons of Edinburgh, to inquire into the State of the teaching of Practical Anatomy in the Medical and Surgical Schools of that City.

Appendix, N° 3.

THE Committee conceive it is generally known to the College, that the introduction of Practical Anatomy as a regular branch of study by medical students, may be regarded as of recent origin in Edinburgh. Forty years ago, in Edinburgh, there was no teacher of Anatomy besides the Professor of Anatomy in the University; there was no class of practical Anatomy, and your Committee believe they may state, that no bodies were dissected, except those used by Dr. Monro for his demonstrations. Soon after this period the study of practical Anatomy was introduced, and has since gradually and rapidly advanced in progress. This seems at first to have arisen from the desire of the students to attain knowledge in this department, and from the zeal of individuals who established private schools of Anatomy, in promoting its study; and more recently from the College of Surgeons having rendered it indispensable that all those who apply for the diploma of surgeon, shall have attended a course of practical Anatomy; from the Senatus Academicus having partially introduced it as a branch of study required in those who are examined for medical degrees; and from the public boards requiring it in candidates for the medical offices in the public service. The Committee conceive that they are justified in stating, that the College of Surgeons had long been impressed with the advantages which would be derived from the study of practical Anatomy, by all those to whom they gave diplomas, but were deterred from enforcing it by the feeling that it would be unjust and inexpedient to do so, while doubts remained, whether it might be in the power of students to obtain opportunities of complying with the regulation.

At present there are, besides the public school of the Professor of Anatomy in the University, four Fellows of the College of Surgeons lecturers on this subject, whose courses may in some respects be considered as public; as certificates of attendance on them are received as qualifications for examination by three universities in Scotland, for the degree of Doctor of Medicine, and by the different colleges of surgeons in Great Britain, in those seeking their diplomas. All these teachers have classes in practical Anatomy.

With regard to the number of students attending practical Anatomy, the Committee may observe, that they conceive the medical students in Edinburgh, during the last two years, may be calculated at about 900 annually.

Appendix, N^o 3,
(continued.)

There were registered, at Surgeons Hall, for the purpose of obtaining qualifications to be examined for the surgical diploma of the College of Surgeons:—

In Session 1826 and 1827	-	-	-	-	-	-	700
In d ^o 1827 and 1828	-	-	-	-	-	-	732
Number in the two years	-	-	-	-	-	-	2)1,432
Average of two years	-	-	-	-	-	-	716

There were matriculated at the University, of students qualifying for the medical degree, or studying for a surgical diploma:—

In Session 1826-1827	-	-	-	-	-	-	858
In Session 1827-1828	-	-	-	-	-	-	765
Total in two years	-	-	-	-	-	-	2)1,623
Average of two years	-	-	-	-	-	-	811

But as there are a number who matriculate at the University, and do not register at Surgeons Hall, and also some who register at Surgeons Hall, but do not matriculate, the whole number of medical students must be regarded as greater than indicated by either of these data. The Committee have not been able to ascertain the exact addition that should be made on this account, but are satisfied that the whole number of medical students is about 900.

The Committee have not been able to ascertain precisely the number of these students who have attended courses of practical Anatomy, chiefly from not having been able to learn the number studying this department in the University, as Dr. Monro has politely declined to give them any information, as he has himself communicated with Mr. Peel; but from the register of the College of Surgeons, and information given them by the other lecturers on Anatomy, they conceive they may state the number at about 380. They would remark, however, that a part of this number must have consisted of students who are not necessarily required by any regulation to attend these courses, and who have not been actually engaged in dissection, but have wished to continue their improvement in Anatomy by the opportunity of witnessing the anatomical investigations carried on by others in the schools. The Committee, from their inquiries, have reason to believe, that the number of anatomical subjects used in Edinburgh during this last winter, has been about 150, and that they have, on an average, cost the teachers about 9 l. or 10 l. each, but have been supplied to the students at about 8 l. each.

From this statement it would appear, that the cultivation of practical anatomy has for a series of years gone on increasing in Edinburgh, and that the opportunities of prosecuting it have also increased in a great degree. Indeed, the Committee are led to believe, from every thing they know, that of late years the opportunities of dissection to students have not been less, nor the expense greater, here than in London.

At the same time it is obvious, that the supply of bodies for anatomical dissection has not increased in proportion to the demand, and is not so ample as desirable or even necessary, that it is to a certain degree precarious, and is only obtained at a greater expense than is convenient for the student to afford. So much has this been felt, that the teachers of Anatomy have for some time past considered it as necessary to submit to a considerable pecuniary sacrifice, in order to place the means of prosecuting their anatomical studies within the reach of the students. This leads your Committee to attempt to form some estimate with regard to the supply of subjects which may be regarded as desirable or sufficient to carry on the anatomical education of the medical school in Edinburgh.

Under the present regulations of the different universities and colleges which grant degrees and diplomas in physic and surgery, and of the boards superintending the medical departments of the army and navy, the Committee are led to conclude, that of the 900 students of medicine annually resorting to Edinburgh, about 300 annually will necessarily require to attend courses of practical Anatomy; and they are of opinion, that in order to enable them to do so with the advantage intended, it is desirable that the supply of anatomical subjects should be at the rate of at least one body for each student. This estimate of the number of bodies required, is much lower than one they have received from an experienced anatomical teacher; but from communication with other teachers, and from their own consideration, they are satisfied, that such a supply as they have stated, if in good condition, and carefully used, would be sufficient for a fair elementary instruction of the students of Anatomy, including the bodies required for the public demonstrations of the lecturers on Anatomy and on Surgery.

Your Committee is by no means satisfied, that any great advantage would be obtained from the supply of bodies being very great, and the price very small. On the contrary, from what has come to their knowledge, they are inclined to believe, that in schools where this is the case, although some diligent students take advantage of the opportunity for Anatomical study which is thus afforded, a great proportion of students are liable to become careless and negligent of dissection; and although a great number of bodies are consumed, yet the same advantage is not obtained from them, as from the diligent dissection which is performed in situations where they are procured less easily, and are of some value. Could the supply of bodies now suggested be procured here at about 5 l. each, the Committee conceive that every purpose desired would be served.

While the study of practical Anatomy was followed by students here only to a limited extent,

extent, the small number of subjects required was procured in Edinburgh and its vicinity, and the price was three or four guineas. As the school of Anatomy extended, and a greater supply was required, the violation of churchyards was more frequently detected, and the feelings of the populace were often irritated by the audacity, carelessness and recklessness of the degraded and ungovernable class of men who are necessarily employed in the occupation of procuring bodies, and whose numbers were considerably increased. These circumstances roused the feelings of the people, and increased the vigilance to prevent these outrages by which the supply here was rendered much more difficult and deficient. Afterwards for some time, a very considerable supply was obtained from London, though at an increased expense. The Committee have reason to believe, that this new demand for bodies had the effect of diminishing, in some degree, the supply of the Anatomical teachers in London; it diminished, to a certain extent, the dependence of the body snatchers on these teachers, and dissensions arose between them and among the body snatchers themselves. The difficulties of procuring subjects in London were by this at the time much increased; a stop was put almost entirely to this source of supply to Edinburgh, and obstacles were produced to the supply of the London school, the effects of which Your Committee believe have not yet ceased to operate. Lately, the supply of subjects in Edinburgh has been procured chiefly from a distance, and a considerable part of it from Ireland, where, it seems, bodies can be procured more easily, and with less outrage to the public feeling than in other parts of the empire. It has been stated, that this new demand for bodies has had the effect of raising the price of them in the Dublin schools; but Your Committee believe, from all they have ever heard, that if no illiberal interference be interposed, the supply required from Dublin by other schools might go on without any real injury being inflicted on the Anatomical school there. If attempts be made to interrupt it, considerable temporary inconvenience it is probable will necessarily be produced in Edinburgh; and Your Committee are convinced that the facilities of obtaining bodies in Dublin itself, will also be most materially diminished and impeded.

It is obvious, that in the present state of the law, and of popular feeling, it would be difficult, if not impossible, to obtain the supply required in Edinburgh from the town or the vicinity. The obstacles do not now arise from a prejudice against opening dead bodies; for this has rapidly declined, and permission can in general be obtained by medical men, without difficulty, to inspect bodies for the purpose of ascertaining the nature of disease. It seems to arise from those feelings of family and domestic attachment which exist in a remarkable degree in this country, being continued to the objects of them even after death. Hence those feelings of respect and care for the remains of relations and connections, and of horror at their being disturbed or treated with indignity, which so universally prevail, and are evinced in many of the customs and habits, and even, it is believed, in some of the laws of the country. They have led to the most jealous precautions against the practices of disinterment, which are often taken with much trouble, and at a considerable expense, and without much regard to the legality of the means which are employed for the purpose.

The Committee are aware that it is not easy to suggest any remedy which could have an immediate and complete effect in removing the difficulties and evils complained of. If the bodies of persons who die friendless, and without any one to care for them, (the number of which in the present state of society is unfortunately but too great in large towns) could be procured for Anatomical purposes, a full supply for all useful ends would be obtained. It has been stated, that in Edinburgh there are from 400 to 500 buried annually at the public expense, which would more than suffice for what is wanted here. At present, however, they are protected by the precautions which are taken to protect the remains of others by their surviving friends; nor is it easy to suggest any means by which this source of supply could be rendered available. The deaths take place in institutions under the superintendence of extensive, and sometimes, popular bodies of directors, the members of which, from their own prejudices, and from the unpopularity which would for a time attend it, might be unwilling to adopt any measure to attain this object. How far it could be attained by any legislative enactment, we know not; but it might, perhaps, be promoted were it to receive the countenance of the members of Government or of the Legislature. It has been suggested, that this source of supply might be rendered available, in a great degree, by distinct places being allotted for depositing the bodies of those who are buried at the public expense. By this, the infringement of the laws in the present state would not be altogether prevented, but the Committee are convinced, and it is believed it is becoming understood by the public at large, that the greater the facility which is given of obtaining the bodies of the worthless, and those who die without friends, the less will the feelings of the respectable part of the community, which we cannot but respect and sympathize with, be outraged, and the less will be the crime and demoralization which are to be deplored, as at present arising from the manner in which the supplies for the Anatomical schools are necessarily procured, and which is one of the most disagreeable circumstances connected with the cultivation of Anatomy.

Another obstacle which has frequently impeded and interrupted the supply of bodies for Anatomical purposes, has been the officious, and, it is believed, sometimes unwarranted interference of magistrates and public officers, where bodies have been detected, or suspected to be concealed, whose powers in such cases are not well defined, or at least not generally understood. These interferences have usually only the effect of obstructing the progress of medical education, and of unnecessarily exasperating popular feeling and prejudice, without diminishing the evils or crimes which they are intended to prevent or punish.

Appendix, N° 3,
(continued.)

Were the powers of magistrates and public officers defined and limited to cases in which application is officially made to them by relations or connections, and their officious and unwarranted interference prevented and discountenanced, this obstacle might, it is conceived, be in a great measure removed.

The Committee beg to state, that the (in their opinion) barbarous and inefficient law by which the bodies of persons executed for murder are given for dissection, has not at all contributed to the progress of Anatomy, but on the contrary has rather tended to increase the prejudices against dissection. The Committee feel doubtful, whether the repeal of that law would produce any material effect in diminishing the obstacles to Anatomical study; but it might be beneficial by evincing in the least objectional manner the desire of the Legislature to promote the cultivation of Anatomy. Even were the bodies of all executed felons and of suicides to be given for dissection, the Committee are happy to think that in Scotland this would do little or nothing to advance the study of Anatomy, and, indeed, they are satisfied it would tend to impede it.

The Committee have only to add, that they conceive it would be attended with the best effects, were the different schools of Anatomy, and the different teachers of the same schools to become convinced that they cannot benefit, but on the contrary, must injure not only their own interests, but those of science, by any ill-judged or illiberal competition, or by attempts to interfere with the operations of each other; and to be also convinced, of what the Committee are satisfied is true, that the interests of the different schools and individuals in them, are best promoted by a good understanding with each other, and by whatever tends to promote the success of all who are engaged in the useful and honourable task of teaching and studying Anatomy.

In name and by appointment of the Royal College of Surgeons, Edinburgh,

Edinburgh, May 2d, 1828.

David MacLagan, M. D. President.

Appendix, N° 4.

Appendix, N° 4.

ANSWERS by Dr. *Jeffray*, Professor of Anatomy in the University of Glasgow, to
 QUERIES respecting the difficulties in procuring subjects for dissection.

Glasgow, May 26, 1828.

Q. 1st. WHAT was the number of students of Anatomy at Glasgow last session?—
 A. Two hundred and forty-five in the University. The number attending private lecturers not known; perhaps forty or fifty.

Q. 2nd. What the number of bodies dissected?—A. Thirty in the University, of which a part were for the public demonstrations during lecture; the rest, the greater part, were for the students in the dissecting-room.

Q. 3rd. What number of subjects would such a number of students require?—A. The students attend the Anatomy class, two, generally three, sometimes four years. They do not all dissect in one year. The number who attended the dissecting-rooms last year was seventy. There would have been more, could subjects have been procured. We wish to manage matters thus:—A subject for the muscles is given to four or five; two of these dissect on one side, and two on the other; the fifth, generally young, reads the descriptions of the parts in some text book, and assists. The second subject is for the blood-vessels; and as the students shift places, he who had a lower extremity before, gets a superior one now. The third subject is for the nerves and absorbents; and the fourth, for the viscera, and a more minute examination of connection and relative position. So that, while every one of the four gets a subject, he actually has the opportunity of examining four, all of which are not long in hand, and of course the less offensive; at the same time, leisure is afforded to examine every thing minutely, and to fix the whole in the memory. Taking 250 as the average number of students of Anatomy at this University, in times of peace, (toward the end of the late war there were upwards of 33 more), and that only one-half of these dissect, during one session of their curriculum, the number of subjects required would be 125, besides those (generally from eight to ten) required for the public demonstration and lectures in the class, by the professor.

Q. 4th. What are the difficulties to the procuring subjects?—A. The general and natural aversion felt against the dissection either of ourselves or of our relations; the association, as the law now stands, of the idea of punishment for crime with that of being dissected; the institution of societies, most of them private and unauthorized, and the erection of watch-houses for the protection of burying-grounds; together with the practice, now common, of burying the coffins in cast-iron safes, till putrefaction be far gone; the severity of the law against those who disinter the dead, or have in their possession dead bodies for dissection; the jealousy and interested interference of rival teachers; the officious interruption given by the police to the conveyance of bodies by land, and the still more irrational, but troublesome opposition, given by the officers of the customs, &c. to the importation of them by sea.

Q. 5th. What are the remedies to be suggested?—A. After thinking on the subject for many years, and considering carefully all the plans proposed, I have always come to this conclusion;—that the public mind would not be satisfied, were those caught in the fact of disinterring or conveying subjects permitted to go unpunished; but unconcerned officious interference might with propriety be discountenanced, if not restrained. That the law, now so severe against those detected in having a body for dissection in their possession, should

should be mitigated, which may quietly be done by legalizing the purchase of subjects. That, though all the criminals hanged in Great Britain were to be given for dissection, the supply would be, and long may it be, altogether inadequate to the absolutely necessary demand. That they who pay so little attention to their relatives when they are alive, as to allow them to die in an hospital or poor's house, and be buried at the public expense, have little reason, or indeed right to make any noise about them, or claim any interest in them, when they are dead; and of those who die in this predicament, and are unclaimed, there are in every large town more than enough to answer the necessary supply.

James Jeffray, M. D.

To H. Warburton, Esq.

Professor of Anatomy, &c.

Chairman of the Committee on Anatomy, &c.

Appendix, N° 5.

COMMUNICATION from Dr. Burns, Professor of Surgery at Glasgow.

Appendix, N° 5.

THE medical school in Scotland is on a different footing from that in England. In England, there is no medical seminary connected with the national establishment; but the different classes, particularly those of Anatomy and Surgery, are generally attached to an hospital. In Scotland, the public and recognized school is within the universities, subject to academical regulation; but lectures are also delivered by many private individuals in the way they think best. Should any direct supply of subjects be practicable, this distinction would be of importance.

In the University of Glasgow, Anatomy and Surgery are taught during a session of six months, by two distinct professors. The difficulty of obtaining a supply for these classes has been great; many of the subjects procured this last winter were children, and of the adults, many were in a very offensive state.

Confining myself to my own department, I would state, that for three years I have been supplied from the anatomical dissecting-room by the demonstrator, with four bodies each session, for the purpose of exhibiting the operations. For this scanty supply I willingly paid a high price (thirty guineas;) but I have received notice from him that he cannot continue to provide for me; and how the class is to be conducted next winter, should the present difficulty continue, I do not see. Even if the small supply I have hitherto obtained were still procured, it is evident that I can do no more than merely show the operations, and explain, not very agreeably, the parts concerned; but can afford no adequate means of improvement to the student himself. In France, on the contrary, there is not only an ample supply of subjects for the study of Anatomy, but also for the performance of operations by the students themselves.

Besides the difficulty and often impossibility of procuring subjects, we are also liable to severe penalties for having them in our possession. The traffic itself is held to be illegal, and a teacher found with a body in his possession is held to be guilty of stealing that body. The fact of possession is considered as proof of his having been concerned in procuring it. There is then the strange contradiction exhibited, which is met with in no other civilized country, of the king appointing a man to an office, the duties of which he cannot perform without infringing the law; and of a man being punishable, if he practise medicine or surgery without due education, whilst the prosecution of that very education is, to all intents and purposes, declared by the statute book to be illegal.

With regard to the remedy for this last evil, little difficulty, it is apprehended, can arise. If the crime be declared to consist in stealing the body, and not in resetting it, every teacher and student then is safe, nor can I conceive that the public would complain.

Greater difficulty must be met with in making a provision for teaching Anatomy and Surgery. The proposals naturally may be divided into those which are permissive, and those which are imperative.

Amongst the first, the most essential and important is the proposal of legalizing the sale of bodies. Even if no body should ever be then sold, the mere circumstance of such a sale being legal would be of great importance, and might pave the way for greater benefits. It would, together with the proposed alteration with regard to the responsibility, make the teacher quite safe; and the traffic being no longer essentially illegal, it would put an end to all officious interference, and the stopping of subjects in transitu.

Another permissive proposition of great importance would be, vesting the managers of infirmaries and hospitals with a power of giving for dissection the bodies of those who died without having any relations to take charge of their funeral, and vesting the same power in overseers of the poor with regard to the bodies of unclaimed paupers. I am aware that few managers and overseers would be disposed at first to exercise this power, nor would it be prudent in teachers to press them; but it would enable them to allow the removal of bodies without observation, which at present they dare not do, owing to the law, even if popular feeling were in their favour. The authority or warrant of a magistrate might be rendered necessary, which would be a mean of preventing a precipitate and rash operation of the permissive regulation. I am convinced, that was this scheme prudently put in practice, and not too soon acted on, it might come into full operation without any observation from the public. It is merely a result of the proposition of legalising the sale of bodies, and should that proposal be adopted, and this additional one agreed to, this latter

Appendix, N° 5,
(continued.)

part of the proposal could be included in the general permission, without attracting much notice.

The other class of proposals, or those which are imperative, would, though more efficient, meet with more opposition. The teacher would have a right to demand the bodies of paupers who had no near relative, and of all who were not claimed within a certain time; whereas, by the permissive regulation, he should have no right, but should be dependent on the discretion of overseers and managers of hospitals. In all probability, the permissive plan would prove quite sufficient.

John Burns, M. D.

To H. Warburton, Esq. Professor of Surgery in the University of Glasgow.
Chairman of the Committee on Anatomy.

Appendix, N° 6.

Appendix, N° 6.

LETTER from Mr. Hodgson, Surgeon, Birmingham, dated May 6th, 1828,
to the Right Honourable Robert Peel.

My Dear Sir,

Birmingham, May 6th, 1828.

I HAVE received a letter from Dr. Somerville, requesting me to supply the Committee of the House of Commons appointed to investigate the difficulties of procuring subjects for dissection, through one of its Members, with any suggestions that have occurred to me as to the best mode of remedying those difficulties, as well as with certain information with regard to the state of Anatomical pursuits in this town, which induces me to take the liberty of troubling you with the following communication:

I am convinced that the feelings of the public can never be reconciled to the practices of dissection, so long as dissection continues to form part of the punishment for murder. The feeling, I really believe, in a great measure arises from the imputation which appears to be cast upon the character of the deceased, in consequence of his remains being subjected to that treatment which the law employs as a part of the punishment for the most heinous crime. I believe, therefore, that an alteration of the law on this subject is essential to reconcile the public to any facilities which may be afforded in procuring the only means of cultivating the most important of all the branches of medical and surgical knowledge.

Dissection being abolished as a part of the punishment for murder, I take the liberty of submitting to you the following, which, after much consideration, appears to me the mode by which the necessary supply of subjects for Anatomical purposes can be procured, with the least violation of private feelings. It is very similar to the plans pursued for the same purposes in some parts of the Continent; only I have avoided including the bodies of persons dying in prisons, because it appears to me very desirable to separate as much as possible the practice of dissection from punishment.

IT shall be lawful for the overseer of the poor, or his deputy, in any parish in Great Britain, to deliver to the surgeon of any public hospital or workhouse, or to any public teacher of Anatomy, requiring the same for the purposes of anatomical investigation, the dead body of any pauper who shall have died in the workhouse, or in any public hospital in his parish, which shall not have been claimed by any of the friends of the deceased, and which requires to be interred at the expense of the parish, under the following regulations:

1st.—The surgeon shall sign a bond, acknowledging the receipt of the dead body, and engaging to return the same within three weeks from the delivery thereof.

2dly.—The surgeon, on receiving the dead body, shall pay to the overseer, or his deputy, to be devoted to the funds of the parish.

3dly.—The overseer of the poor, or his deputy, shall, on the said dead body being returned, give to the surgeon a receipt for the same, and shall, within two days from the date of the said receipt, cause the dead body to be interred in the same manner as if the said dead body had not been subjected to anatomical investigation.

4thly.—It shall not be lawful for the overseer of the poor, or his deputy, to deliver to any surgeon the dead body of any pauper as aforesaid, if it shall happen that the said pauper shall have expressed to the overseer, or his deputy, or in the presence of any two competent witnesses, his reluctance that his remains shall be employed as aforesaid.

5thly.—Any overseer of the poor, or his deputy, or any surgeon or teacher of Anatomy, who shall violate any of these regulations, shall be liable to a fine of to be recovered, upon oath, by an order from any of His Majesty's justices of the peace.

In reply to some inquiries mentioned in Dr. Somerville's letter, I beg to state, that in Birmingham there are between eighty and ninety medical practitioners, and about forty students. There is one anatomical lecturer, (Mr. Cox) who informs me that about twenty-five persons attended his lectures last winter, fourteen of whom were new pupils, the remainder were established practitioners, or non-professional attendants. The number of bodies dissected was eight. From inquiries that I have made, I have reason to believe that the workhouse in this town would afford more than four times that number of bodies, according to the plan that I have mentioned. Those employed last winter were, I believe, procured

procured in the usual manner, by exhumation; and the discovery of this practice has caused considerable commotion and distress to the inhabitants of some of the neighbouring villages. Indeed, I am convinced that the occasional discovery of this practice causes far more annoyance to public feeling than could be produced by the adoption of a plan similar to that which I have detailed in the former part of this letter.

I have the honour to be, my dear Sir, your most obedient and faithful servant,

J. Hodgson.

Appendix, N^o 6,
(continued.)

Appendix, N^o 7.

LETTER from Mr. Estlin, Surgeon, dated Bristol May 1st, 1828.

Appendix, N^o 7.

Sir,

Bristol, May 1st, 1828.

IN compliance with your request that I should send you some remarks relative to the difficulties of procuring subjects for Anatomical studies, I proceed to make a few observations upon the points to which my attention has been directed.

1st.—*With respect to “the opportunities of carrying on Dissections in Bristol:”*

From the difficulty of procuring subjects, these opportunities are very limited here, as they are every where else. The desire of acquiring Anatomical knowledge among the medical students is great; and could an adequate supply of bodies be procured, without the hazard and expense at present existing, the consequence would be most beneficial in facilitating their education, and in rendering it more complete.

2d.—*“The number of Pupils, and names of the Anatomical Teachers in Bristol:”*

There are only two dissecting rooms with appropriate lectures; they are under the direction of Dr. Wallis and Riley, and a Mr. Clark; the average number of pupils attending these lectures may be about sixteen at each school.

3d.—*“The number of Bodies used:”*

Probably not more than three in a season are procured by each lecturer. Two courses of lectures are given in the winter, and to render a course complete, four subjects are requisite. For the lecturers then at the two schools, sixteen bodies should be had. A supply of subjects for dissection is also necessary for the students as well as for the lecturers; for them not less than eight or ten should be provided at each school.

It ought however to be known, that it is not for Anatomical schools alone that an easy supply of subjects should be procurable;—surgeons during every period of their professional lives, require opportunities of occasional dissection; and many, when first settled in practice, before their engagements become numerous, would devote much time in perfecting themselves in this important study, were they favoured with the opportunity. To speak individually, I can truly say, that some of the most valuable part of the Anatomical knowledge which I possess, was acquired after I had completed my studies in London and Edinburgh, and had established myself in practice in this city. It was however at much personal risk, and the hazard of reputation, that I prosecuted these important pursuits; being obliged to go out with other professional friends similarly engaged, to procure bodies from burying grounds. Every surgeon ought to be able, at any time, to procure bodies for dissection at a moderate expense, and without the present evils of illegal exhumation.

4th.—*“The difficulties of obtaining bodies:”*

These are the same here probably as in other places. Subjects are occasionally had from London at a great price; to avoid this, and to procure the bodies in a state more fit for dissection, young men generally dig them up themselves, at the risk of their lives, their health, and their credit in society.

5th.—*“Remedies I would suggest:”*

The remedy which has always appeared to me most natural and most easy is, that surgeons, under certain restrictions, should be allowed to have for dissections the bodies of persons dying in public institutions (such as hospitals, poor-houses, prisons, &c.) who have been supported by the public, who have no friends whatever to claim them after their decease to attend them to the grave, or to have their feelings pained by such a disposition of the bodies. In every town where there is an hospital, I believe, a moderate proportion of those of this description who die there, would be amply sufficient for the supply of the town and neighbourhood.

I do not pretend to advise the detail of any plan, but I should think no difficulty would exist in the arrangement. A certain moderate sum might be paid to the hospitals; references as to the respectability of the parties applying for bodies might be required, &c. &c.

The sentence of dissection after execution for murder, I have always considered a most unfortunate and unnecessary bar to the progress of Anatomical studies, by the prejudice thus encouraged against them.

I am, Sir,

Your obedient and respectful servant,

John Bishop Estlin.

To H. Warburton, Esq.

Chairman of the Committee on Anatomy.

Appendix, N° 8.

Appendix, N° 8.

EXTRACTS from a Letter of Mr. *Turner*, Lecturer on Anatomy and Physiology, dated Manchester, April 30, 1828, to Henry Warburton, Esq.

Sir,

April 30, 1828.

I HAVE delivered lectures on Anatomy and Physiology for the last six years, and during the first three or four seasons I was tolerably well supplied with the means of giving practical instruction in these important branches of medical and surgical education; but of late we have had extreme difficulty in obtaining subjects. As, however, we had undertaken to supply the means of dissection, we have been obliged to pay an exorbitant price, and to sanction such practices as are very repugnant to our feelings; but the evil has shown itself in the deplorable circumstance, that for want of pecuniary means, some students have been under the necessity of resting satisfied with mere oral instruction, assisted by demonstrations in the public lectures.

I shall now reply to the points on which you wish to obtain information; but with respect to the first, viz. "the opportunity of carrying on dissection in Manchester," it has already been sufficiently dwelt on. In reply to the second point, "the number of pupils attending the dissecting rooms during the present winter," I beg to state, that there are from seventy to eighty pupils in the two anatomical establishments; one of them under my own direction, the other under that of Mr. Jordan. The number of bodies used has been from forty to fifty; but more would have been dissected had there not existed great difficulty and risk in obtaining them.

Lastly, with regard "to the remedies" I would propose, I presume to observe that there are three which seem to me quite unobjectionable; namely, 1st, the disposal for the purposes of dissection of all unclaimed bodies; 2dly, allowing importation; and 3dly, giving over the bodies of persons executed in the county towns. The first of these sources of supply has been alluded to and sanctioned by every friend to human dissection; but on the second and third sources proposed, a few words may be necessary. I am of opinion, that if importation from Ireland were allowed, our schools would be abundantly supplied; and I presume that it would not be difficult to suggest the means of removing the objection that may be made to this measure, namely, that it may afford a vehicle for the transmission of contraband articles, and thereby open a path to fraud and evasion of duties. All parts of the North might be furnished with subjects for dissection from this source of supply, and the schools in London and other parts might derive the means from the Continent. The bodies of persons executed at Lancaster (our county town), and on which sentence of dissection has been passed, are now, I believe, *only nominally* dissected; if such bodies were consigned over to the schools of anatomy, the ends of justice would be more fully accomplished, and the dead rendered subservient to the use of the living; but this source can only be considered as an auxiliary one.

I have the honour to be, Sir,

Your obedient humble servant,

Manchester, 30, King-street.

Tho. Turner.

Appendix, N° 9.

Appendix, N° 9.

LETTER from Messrs. *Barnes & James*, Surgeons to the Devon and Exeter Hospital, to Henry Warburton, Esq. dated Exeter, April 19th, 1828.

Sir,

April 19th, 1828.

WE beg to state to you, for the information of the Committee, that in the year 1819 we commenced giving an annual course of anatomical demonstrations at the Devon and Exeter Hospital, with the view of affording pupils, in the early part of their education, the means of acquiring some knowledge of that science on which so much depends; and the governors of the hospital, in order to promote so desirable an object, have built a commodious lecture room.

The city possesses an hospital containing two hundred patients, a dispensary, an eye infirmary, and has contiguous to it a large workhouse, the county gaol and bridewell, together with a large poor population. It is in many respects well calculated to become a place of instruction, in the elements, at least, of medical science; to advance a useful knowledge, of which nothing can be of so much importance as an early and accurate acquaintance with anatomy.

The very many advantages offered to medical students of acquiring a practical knowledge of their profession in these various places of instruction, make us regret the more that the obstacles are so great which interfere with the teaching of anatomy.

The anatomical course is intended to be, as an elementary one, complete, and whenever we have been able to procure subjects, has been continued through four or five of the winter months. The average number of attendant pupils has been sixteen; but, from the number of medical pupils in this place, we have every reason to believe that the number would be considerably increased had we more ample means of giving instruction.

To avoid the unpopularity and odium which would attach to the hospital, should it be understood that we favoured the disinterment of bodies buried here, or in this neighbourhood, we have invariably purchased them in London.

During

During the two or three first winters, though we had to pay rather a high price for good subjects, yet we had not much difficulty in procuring them. For the last two or three seasons, the cost has to us been twelve guineas; and the great difficulty of obtaining them, at that price, and as a favour, has interfered most seriously with our plans, and made the course very incomplete. The instruction has been on our part gratuitous; the pupils subscribing a sum sufficient to pay the expenses. In some winters, we have not been able to obtain more than one subject. For the purposes of the course, we require three or four; and the pupils, for their private dissection, would well employ as many more.

We think, that if the law would grant the unclaimed bodies of persons dying at the hospital, the workhouse, and the gaols, an ample supply could be obtained. The subjects would be also but recently deceased; and from the probable sufficiency of the supply, the bodies might be interred at the expiration of a given time, without any such dismemberment as would render burial, according to the rites of the church, objectionable. If required, we would undertake to defray all expenses of interment.

Should this source disappoint us, it would yet very much assist us, if the facilities of obtaining bodies from London were such as to ensure the purchase of a subject at any required time, and at a moderate price.

We have the honour to remain,

Your obedient servants,

Sam. Barnes, John Haddy James,

Surgeons to the Devon and Exeter Hospital.

Exeter, April 19th, 1828.

Appendix, N° 10.

LETTER from Dr. Traill, of Liverpool, addressed to Henry Warburton, Esq. M.P. Chairman of the Committee of Inquiry into the state of Anatomical Studies in these Kingdoms; dated May 1, 1828.

Appendix, N° 10.

Sir,

Liverpool, May 1, 1828.

IN compliance with the Dr. Somerville's request, I beg leave to transmit to you the following remarks on the study of Anatomy in Liverpool:

We have in this place two public teachers of Anatomy, Dr. Formby and Mr. Gill, who annually deliver lectures on that subject, and have dissecting rooms connected with their establishments.

The average number of pupils under both is about forty, including students of medicine, sculptors and painters, and a few who attend without professional views; but the greatest number are young men intended for the medical profession.

The number of bodies annually required for these lectures and dissecting rooms is, I am informed, from twenty-four to twenty-eight, to which should be added what are *privately* dissected by different medical men among us, anxious for the improvement of their art; but of these it is impossible to obtain any tolerable estimate.

The price of anatomical subjects here has varied from three to seven guineas each, or even more. Bodies can be easily procured in Dublin, and brought to Liverpool at a cost of from three to five guineas; but the frequent seizures of bodies so imported, by our Custom-house officers, have rendered the supply precarious and the price fluctuating.

A great number of young men receive in Liverpool the elements of their medical education, either in our extensive medical charities, or in the establishments of our highly respectable surgeons; but comparatively few of them are here able to acquire a due knowledge of practical Anatomy, from the expense and risk of pursuing, under the present system, such investigations.

On this account some of them go to Dublin, and a few to Paris, to acquire this essential basis of surgical skill, which can now be much more cheaply obtained even in a foreign land than in London.

The difficulty of procuring anatomical subjects has of late greatly increased in Liverpool. This is owing to the excitation of the public mind, occasioned by the detection of a disgusting wholesale trade in dead bodies from this place, for the supply of London, Edinburgh and Glasgow; to the severity of the sentences passed at our quarter sessions on those in whose possession a recognized body has been found, and to the interference of our Custom-house officers in preventing the importation of anatomical subjects from Ireland.

It requires a long series of years to establish a respectable medical school; and the injury which the present obstructions to the acquirement of anatomical knowledge are daily inflicting on the schools of Britain are of the most serious character. It is frightful to consider, should the present system be continued, how often, in after times, the young surgeon will have to try his knife on the living body without having acquired, on the dead subject, that manual dexterity and knowledge of contiguous parts so necessary to the safety of his patient. It must be acknowledged that there are difficulties in the way of legislating on this subject, when so many popular prejudices, and so many amiable feelings too, are in danger of being excited. Perhaps the evils complained of might be lessened by enactments to the following effect:

- 1.—To legalize the sale of dead bodies by the friends of the deceased, leaving to them the option, in all cases, of committing the body at once to the earth, or of first submitting it to the examination and research of the anatomist.

Appendix, N° 10,
(continued.)

2.—To legalize the importation of anatomical subjects so as to prevent the interference of the Custom-house officers in diverting them from their destination.

Were this done, bodies could be procured, on moderate terms, in most parts of England, from Ireland, or even from France.

3.—To repeal the clause which orders dissection as a part of the punishment of the most atrocious crime.

I have heard it urged as an argument against suffering even the anatomical inspection of a body, that "*the deceased was no murderer.*" Those who doubt the effect of such notions on the minds of the multitude, appear to me to have little practical acquaintance with their modes of thinking on such subjects; and it may be well doubted if ever the arm of the murderer was arrested by the consideration that, in case of detection, his dead limbs would be dissevered by the Anatomist, instead of being more slowly consumed by worms.

I have the honour to be, Sir, your most obedient humble servant,

Thos. Stewart Traill.

Appendix, N° 11.

Appendix, N° 11.

REGULATIONS of the Court of Examiners of the Society of Apothecaries, London; applicable to Persons who commenced attendance on Lectures since 1st of February 1828.

THE Court of Examiners chosen and appointed by the Master, Warden, and Assistants of the Society of Apothecaries of the City of London, in pursuance of a certain Act of Parliament, "for better regulating the Practice of Apothecaries throughout England and Wales, passed in the 55th year of the reign of his Majesty King George the Third, have determined:

That every candidate for a certificate to practise as an apothecary, shall be required to possess a competent knowledge of the Latin language, and to produce testimonials of having served an apprenticeship of not less than five years to an apothecary; of having attained the full age of twenty-one years, and being of a good moral conduct.

N. B.—Articles of apprenticeship, where such are in existence, will be required; but in case such articles shall have been lost, it is expected that the candidate shall bring forward very strong testimony to prove that he has served such an apprenticeship as the Act of Parliament directs.

He is also required to produce certificates of having attended not less than—

One Course of Lectures on Materia Medica and Medical Botany:

One Course of Lectures on Chemistry:

Two Courses of Lectures on Anatomy and Physiology:

Two Courses of Lectures on the Theory and Practice of Medicine—these last to be attended subsequently to the lectures on Materia Medica, Chemistry, and to one course at least of Anatomy.

N. B.—No testimonial of attendance on lectures on the principles and practice of medicine, delivered in London, or within seven miles thereof, will render a candidate eligible for examination, unless such lectures were given, and the testimonial is signed by a fellow, candidate, or licentiate of the Royal College of Physicians.

A certificate of attendance for six months at least on the medical practice of some public hospital or infirmary, or for nine months at a dispensary,—such attendance to commence subsequently to the termination of the first course of lectures on the principles and practice of medicine.

N. B.—Physicians' pupils, who intend to present themselves for examination, must appear personally at the beadle's office in this hall, and bring with them the tickets authorizing their attendance on such practice, as the commencement thereof will be dated from the time of such personal appearance.

The regulations relating to the order of succession in which the lectures on the practice of medicine, and the medical practice of an hospital or dispensary, are to be attended, are designed to apply to those students only who shall commence their attendance on lectures on or after the 1st of February 1828; and all such persons are particularly requested to take notice, that unless they shall have strictly complied with such order of succession, they will not be admitted to an examination.

In addition to the course of study above required, and which is indispensably necessary, the candidates are earnestly recommended to attend one or more courses of lectures on midwifery, and the diseases of women and children; on the latter of which subjects, as an important part of medical practice, they will be examined.

The court have determined, that the examination of the candidate shall be as follows:—

1. In translating grammatically parts of the Pharmacopœia Londinensis, and Physicians' Prescriptions.

Should any doubt arise as to the candidate's possessing a competent knowledge of Latin, he will be required to translate a passage or passages from some one of the easier Latin authors.

N. B.—The court are anxious to impress upon candidates a conviction of the necessity of a knowledge of the Latin language, because they have had the painful duty imposed on them,

them, of rejecting several persons, entirely from their deficiency in this important prerequisite of a medical education.

2. In Chemistry.
3. In the Materia Medica and Medical Botany.
4. In Anatomy and Physiology.
5. In the Practice of Medicine.

Notice.—Every person intending to qualify himself under the regulations of this Act, to practise as an apothecary, must give notice in writing, addressed to the clerk of the society, on or before the Monday previously to the day of examination; and must also at the same time deposit all the required testimonials at the office of the beadle, at Apothecaries' Hall, where attendance is given every day (except Sunday) from 9 until 2 o'clock.

The court will meet in the hall every Thursday, where candidates are requested to attend at half-past 1 o'clock.

London, Sept. 14, 1827.

By order of the Court,

John Watson, Secretary.

Appendix, N° 11.
(continued.)

Appendix, N° 12.

REGULATIONS of the Council of the Royal College of Surgeons in London, relating to the Age and professional Education of Candidates for the Diploma of the College.

Appendix, N° 12.

I.—THE only schools of Anatomy and Physiology recognized, are London, Dublin, Edinburgh, Glasgow, and Aberdeen.

II.—Attendance upon the surgical practice of an hospital will be recognized, provided such hospital contain, at least, one hundred patients.

III.—No person under twenty-two years of age shall be admitted a member of the College.

IV.—The following certificates will be required of candidates for the diploma of the College:

1. Of having been engaged six years, at least, in the acquisition of professional knowledge.

2. Of having regularly attended three or more winter-courses of anatomy and physiology, and two or more winter-courses of dissections and demonstrations, delivered at subsequent periods.

[Two courses of anatomy and physiology in Edinburgh or Dublin, which are of six months duration, and the accompanying courses of dissections and demonstrations, will be considered as equivalent to the foregoing attendance.]

3. Of having regularly attended two or more courses of lectures on the principles and practice of surgery; one of which shall have been delivered in a recognized school of anatomy.

4. Of having also attended the following lectures, viz.

Two courses on the theory and practice of physic of three months each, or one of six months.

One course on materia medica and botany.

Two courses on chemistry of three months each, or one of six months.

Two courses on midwifery of three months each, or one of six months.

5. And of having attended during the term of, at least, one year, the surgical practice of one or more of the following hospitals; viz. St. Bartholomew's, St. Thomas's, the Westminster, Guy's, St. George's, the London, and the Middlesex, in London; the Richmond, Steeven's, and the Meath, in Dublin; and the Royal Infirmarys in Edinburgh, Glasgow, and Aberdeen; or during four years the surgical practice of a recognized provincial hospital, and six months, at least, the practice of one of the above-named hospitals, in the schools of anatomy.

V.—Candidates under the following circumstances, of the required age, and who have been engaged five years in the acquisition of professional knowledge, will be admissible to examination; viz.

Members, or licentiates in surgery, of any of the legally constituted Colleges of Surgeons in the United Kingdom:

And graduates in medicine of any of the Universities in the United Kingdom, provided they have attended lectures, the practice of an hospital, and performed dissections, as required in Regulation IV.

VI.—The required certificates shall express the dates of the commencement and of the termination of attendance on each course of lectures and dissections; and also of attendance on hospital practice.

VII.—The required certificates shall be delivered at the College ten days before candidates can be admitted to examination.

5th day of January 1828.

(By order,)

Edmund Belfour, Secretary.

Appendix, N° 13.

Appendix, N° 13.

Administration Générale des HÔPITAUX, HOSPICES et SECOURS à Domicile, de Paris.

L'ADMINISTRATION, considérant qu'il est nécessaire que les élèves qui fréquentent l'Amphithéâtre connaissent les dispositions réglementaires qui les concernent ;

Considérant qu'il lui importe de faire connaître aussi qu'en exigeant une rétribution pécuniaire pour la délivrance des sujets d'étude de l'anatomie, elle a voulu en assurer la conservation dans l'intérêt de la science, faire cesser l'abus de mutiler sans précaution, nécessité, ni profit pour l'étude, les corps délivrés gratuitement aux élèves, et intéresser ceux-ci à retirer des sujets qu'ils obtiennent tous les avantages qu'ils présentent à l'instruction :

L'administration, par ces motifs, a jugé nécessaire de faire imprimer un extrait du règlement intérieur de l'Amphithéâtre.

Extrait du Règlement Intérieur de l'Amphithéâtre d'Anatomie des Hôpitaux et Hospices Civils de Paris.

Article 1^{er}. L'Amphithéâtre est spécialement consacré à l'instruction des élèves des Hôpitaux et Hospices, ainsi que des aspirans et, par préférence, de ceux de l'Hôtel-Dieu, de la Pitié et de l'hospice de la Vieillesse (Femmes).

Art. 2. Les étrangers à la France ne seront admis dans l'Amphithéâtre, pour y étudier l'anatomie, qu'autant qu'ils en auront reçu l'autorisation du membre du conseil général ou de celui de la commission administrative qui sont chargés de cet établissement.

Art. 3. Le chef des travaux anatomiques dirigera l'Amphithéâtre ; il en aura la police et la surveillance ; c'est lui qui fera le classement des sujets.

Art. 4. Le classement aura lieu sous les numéros 1, 2 et 3, selon le degré d'avantages que les sujets présenteront à l'étude de l'anatomie.

Art. 5. La rétribution à payer par chaque sujet est fixée d'après cet ordre de classement ; savoir,

Pour un sujet, n° 1, à huit francs ;

Pour *id.*, - n° 2, à cinq francs ;

Pour *id.*, - n° 3, à trois francs.

Art. 6. L'injection des sujets sera payée, à raison de quatre francs. Les sujets n° 1^{er} étant les seuls qui soient propres à cette préparation, la rétribution en sera de douze francs, lorsqu'ils seront injectés.

Art. 7. Les élèves seront distingués en trois classes : la première comprendra les élèves internes placés dans les Hôpitaux et Hospices ; la seconde, les élèves externes ; la troisième, les aspirans à l'externat.

Art. 8. Les élèves internes paieront les sujets n° 1, cinq francs, les sujets n° 2, trois francs, et ceux qui seront injectés, six francs.

Les élèves externes et les aspirans paieront la rétribution fixée par l'article 5.

Art. 9. Une table de dissection sera complète lorsque quatre élèves y seront réunis.

Art. 10. Lorsque quatre internes disséqueront ensemble à la même table, les sujets leur seront délivrés gratuitement, excepté ceux qui seront injectés, et pour lesquels les frais d'injection seront payés quatre francs.

Art. 11. Lorsque quatre externes seront réunis et disséqueront à la même table, ils jouiront des avantages assurés à un interne par le premier paragraphe de l'article 8.

Art. 12. Il sera tenu un registre pour l'inscription des demandes de sujets ; les élèves internes, les externes et les aspirans y auront un compte ouvert, et une série de numéros par chaque classe.

Ce registre sera tenu par celui des prosecteurs que le chef des travaux aura désigné.

Art. 13. Les élèves internes seront servis les premiers ; les externes le seront ensuite, et en dernier lieu les aspirans, s'il y a possibilité.

Art. 14. La distribution des sujets sera toujours faite à une heure fixe ; on suivra invariablement l'ordre d'inscription des élèves ; l'appel en sera fait au moment de la distribution. Si un élève appelé ne se présentait pas, le sujet qui lui était destiné sera délivré à l'élève qui le suivra immédiatement dans l'ordre d'inscription sur le registre des demandes.

Art. 15. Si un sujet restait plus de vingt-quatre heures sur la table sans être étudié, il sera donné à d'autres élèves et compris dans la plus prochaine distribution.

Art. 16. Les sujets qui seront délivrés pour l'exercice des opérations chirurgicales seront remis :

1°. Aux élèves internes, pour le prix de trois francs ;

2°. Aux élèves externes, pour quatre francs ;

3°. Aux aspirans, moyennant cinq francs.

Art. 17. Lorsque quatre élèves internes, réunis à la même table, s'exerceront ensemble au manuel des opérations chirurgicales, les sujets leur seront délivrés gratuitement.

Art. 18. Quatre externes s'exerçant ensemble à la même table jouiront des mêmes avantages qu'un interne, d'après les dispositions de l'article 16.

Art. 19. Si un élève restait plus d'un jour sans se rendre à l'étude, sa place sera donnée à un autre étudiant, et il ne pourra la reprendre qu'au renouvellement de la table sur laquelle il travaillait.

Art. 20. Lorsqu'il sera constant qu'un élève interne ou externe n'aura, pour son entretien, que le strict nécessaire, et que sa famille sera hors d'état d'y pourvoir plus abondamment,

ment, il pourra être dispensé de toute ou de partie de la rétribution exigée pour la délivrance des sujets.

Dans ce cas, il en fera la demande à l'Administration, en l'appuyant de preuves écrites, et il sera statué après avoir vérifié les renseignemens produits par l'élève.

Art. 21. Deux laboratoires seront spécialement consacrés dans l'Amphithéâtre au service des cliniques de l'Hôtel-Dieu, pour y continuer les recherches d'anatomie pathologique qui ne pourraient être achevées dans cet Hôpital.

Ces laboratoires seront sous la surveillance immédiate du chef des travaux anatomiques, et seront soumis à toutes les règles d'ordre, de propreté et de salubrité qui régissent l'Amphithéâtre.

Art. 22. Tous les sujets ouverts, provenant de l'Hôtel-Dieu, de la Pitié et de la Vieillesse (Femmes), seront remis sans frais à ceux des élèves de ces établissemens qui seront chargés par leurs chefs respectifs de faire ou de continuer des recherches d'anatomie pathologique, et qui justifieront de cette mission par la présentation de l'ordre écrit qu'ils en auront reçu.

Art. 23. Lorsqu'une pièce d'anatomie pathologique aura été préparée dans ces laboratoires, elle pourra être reportée dans les établissemens précités, pour servir aux leçons, si les professeurs la demandent.

Art. 24. Des cabinets particuliers seront affectés aux travaux des élèves internes : ces cabinets seront soumis à toutes les règles d'ordre, de propreté et de salubrité qui régissent l'Amphithéâtre.

Art. 25. Il y aura des laboratoires consacrés aux recherches spéciales, auxquelles les chefs du service de santé des Hôpitaux et Hospices voudraient se livrer : ces laboratoires seront sous l'inspection directe du chef des travaux anatomiques.

Art. 26. Les prosecteurs seront au nombre de deux : l'un aura le titre de premier, l'autre de second. Si le premier prosecteur venait à cesser ses fonctions pour quelque cause que ce soit, il sera remplacé par le second, et celui-ci par un nouveau prosecteur, nommé par l'Administration, sur la présentation du chef des travaux anatomiques.

Art. 27. Les prosecteurs pourront représenter le chef des travaux en son absence ; ils dirigeront les élèves dans les circonstances difficiles, et seront chargés de tout ce qui est relatif à l'injection des sujets, ainsi que de la préparation et de la répétition des leçons.

Art. 28. Les prosecteurs prépareront les pièces d'anatomie et d'anatomie pathologique qui doivent être conservées dans le Musée d'anatomie.

Art. 29. L'un des prosecteurs sera chargé de la surveillance et de la conservation du matériel de l'Amphithéâtre ; l'autre de celles du Musée, des pièces qu'il renferme et de la Bibliothèque.

Le chef réglera ces attributions, et désignera ceux des prosecteurs qui devront les remplir.

Art. 30. Indépendamment du service général, les prosecteurs seront tenus d'être alternativement de garde, pour surveiller l'arrivée et le départ des voitures qui transportent les corps et leurs débris ; veiller à ce que les tables et les salles soient régulièrement et complètement lavées, et pour s'assurer que toutes les mesures d'ordre, de propreté et de salubrité ont été exécutées.

Art. 31. Les salles de dissection seront ouvertes aux élèves depuis dix heures du matin jusqu'à quatre heures du soir.

Art. 32. Immédiatement après la fermeture des salles, les débris de sujets seront remis dans leurs linceuls, et les salles ainsi que les tables seront lavées avec le plus grand soin.

Art. 33. Tous les soirs, à la chute du jour, les sujets sur lesquels on aura cessé d'étudier seront portés au cimetière.

Art. 34. Il est défendu de rien dégrader dans les salles, dans les laboratoires, les cabinets, ni aucune autre partie de l'Amphithéâtre, sous peine de payer le dommage et d'en être exclus.

Art. 35. Les élèves seront solidairement responsables de ces dégradations, sauf leur recours contre ceux qui les auraient commises.

Art. 36. Aucun élève ne pourra troubler l'ordre et la tranquillité nécessaires à l'étude, sous peine d'exclusion.

Art. 37. La fixité dans les idées, le recueillement et le méditation étant des conditions de succès dans l'étude des sciences, toutes conversations ou discours sur des matières étrangères à l'anatomie sont formellement interdits dans les diverses parties de l'Amphithéâtre : ceux qui s'y livreraient et qui ne déféreraient pas aux représentations du chef des travaux, ou des prosecteurs, pourront être, à l'instant même, exclus de l'établissement pour n'y plus rentrer.

Art. 38. Il est défendu de jeter et de disperser aucun débris de sujets ; ils doivent être déposés dans les baquets ou laissés sur les tables pour être enlevés après la clôture des salles.

Art. 39. Il est défendu aux élèves de faire des macérations ou toutes autres préparations anatomiques, sous quelque prétexte que ce soit, sans l'autorisation du chef des travaux.

Art. 40. Il est interdit aux élèves de faire sortir des salles des pièces préparées ou non, ni aucun débris, pour être emportés hors de l'Amphithéâtre.

Art. 41. Lorsqu'un élève voudra étudier une pièce anatomique faisant partie du Musée, consulter des estampes, des dessins ou des livres de la Bibliothèque, il en fera la demande au chef des travaux, qui, s'il le juge convenable, permettra au prosecteur de communiquer l'objet demandé, mais sans désemparer, et sous la condition expresse de ne le point faire sortir de la galerie ou de la Bibliothèque.

Appendix, N° 13.
(continued.)

Art. 42. Il est recommandé aux élèves de ne point donner aux garçons de salles des gratifications, sous quelque forme ou dénomination que ce soit.

Art. 43. Les garçons d'Amphithéâtre ou de salles seront choisis par le chef des travaux, et révocables par lui; ils seront sous ses ordres immédiats, et dans son absence et pour les détails du service, ils seront tenus d'obéir aux prosecteurs.

Art. 44. Les garçons d'Amphithéâtre seront chargés de ramasser les débris, comme il est prescrit à l'article 32, et de les disposer pour être transportés au cimetière; de nettoyer et laver les salles, les tables et les baquets, et de les tenir dans l'état de la plus grande propreté; et enfin de faire tout ce que le chef jugera à propos de leur commander pour le bien du service.

Art. 45. Les garçons ne pourront, sous peine de renvoi, exiger ni recevoir des élèves aucune rétribution ou gratification, sous quelque forme que ce soit; ils pourront d'ailleurs être soumis à toutes les règles d'ordre et de police que le chef des travaux jugera nécessaires.

Paris, le 30 Octobre 1812.

Pour extrait conforme,

Le membre de la Commission administrative chargé des Hospices,

B. Desportes.

Approuvé le présent extrait, le membre du Conseil général.

Signé le duc de Doudeauville.

Appendix, N° 14.

Appendix, N° 14.

ABSTRACT OF RETURNS FROM ANATOMICAL SCHOOLS.

				1826.		1827.			
				N° of Pupils entered to Anatomy.	N° to Dissecting Room.	N° who have actually Dissected.	N° of Bodies actually Dissected.	N° of Pupils entered to Anatomy.	N° to Dissecting Room.
St. Bartholomew's Hospital	-	-	Mr. Abernethy	170	150	-	85	176	160
Guy's Hospital	-	-	Mr. B. Cooper	84	86	151	80	81	88
St. Thomas's Hospital	-	-	Mr. Green	167	-	121	70	133	-
London Hospital	-	-	Mr. Headington	60	45	40	42	-	-
Great Windmill Street	-	-	Mr. Mayo	79	71	95	90	82	60
Webb-street School, Borough	-	-	Mr. Grainger	125	125	-	112	142	142
Little Dean-street, Soho	-	-	Mr. Bennett	38	30	30	30	-	-
Chapel-street, Grovesnor-square	-	-	Mr. Sleigh	50	50	45	15	-	-
Dean-street, Soho	-	-	Mr. Carpue	30	30	20	-	-	-
Howland-street, Fitzroy-square	-	-	Mr. Tuson	17	17	14	8	-	-
Aldersgate-street	-	-	Mr. Tyrrell	42	46	46	28	46	54
Little Windmill-street	-	-	Mr. Dermott	45	51	30-35	30-35	50	43

Appendix, N° 15.

Appendix, N° 15.

NUMBER of the FELLOWS and LICENTIATES of the College of Physicians, London,
admitted in the Year 1827.

Fellows - - - - - 5
Licentiates - - - - - 11

W^m Macmichael, Registrar.

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Appendix, N° 16.

Guy's Hospital;—NUMBER of PATIENTS admitted during the Year 1827.

Appendix, N° 16.

In-patients entered at Guy's Hospital during the year 1827	-	-	2,767
Out-patients entered during the same period	-	-	13,065
Casualties entered and relieved at the surgery during the same period	-	-	20,890
			<u>36,722</u>
Patients died in the hospital during the same period	-	-	299
Of which, claimed and taken from the hospital	-	-	208
Buried in the hospital burying ground, at the expense of their friends	-	-	41
Unclaimed, or claimed and not taken away, or which have been buried at the hospital expense	-	-	50
			<u>299</u>

Benjamin Harrison, Treasurer Guy's Hospital.

Appendix, N° 17.

A RETURN of the Number of PATIENTS who have died in *St. Thomas's Hospital*, in *Southwark*, during the last Ten Years; distinguishing the Number of those who were removed from the Hospital by their Friends and Securities, and the Number of those Buried in the Hospital Burial Ground; also separating the latter into the several Divisions of those buried at the cost of their Friends and Securities,—their several Parishes,—the Corporation of the City of London,—the Victualling Office, and the unclaimed Bodies buried at the cost of the Hospital.

YEAR.	TOTAL Number died.	Number of those taken away by their Friends and Securities.	Number buried in the Hospital Burial Ground.	Number of these buried at cost of Friends and Securities.	Number of Parish Patients buried at the cost of their Parish.	Number buried at the cost of the City of London.	Number buried at the cost of the Victualling Office.	Number of unclaimed buried at cost of the Hospital.	Total number of the three last Divisions.
1818	234	176	58	31	4	11	2	10	23
1819	209	153	56	26	8	11	7	4	22
1820	225	173	52	26	7	10	3	6	19
1821	201	162	39	22	8	8	0	1	9
1822	193	151	42	21	4	11	3	3	17
1823	248	205	43	20	8	10	2	3	15
1824	175	135	40	18	5	10	1	6	17
1825	237	175	62	29	6	10	5	12	27
1826	240	173	67	29	7	12	5	14	31
1827	259	194	65	32	7	18	2	6	26
	2,221	1,697	524	254		111	30	65	206

Memorand.—The friends of City Patients frequently attend their Funerals, so that it is not probable more than about twelve bodies could be annually given up for dissection from out of the three last Divisions.

Appendix, N^o 18.Appendix,
N^o 18.

RETURNS

I. OF the Number of Persons who, in the Year 1827, died in the Workhouses of the several under-mentioned Parishes in the City of London, Within the Walls, Without the Walls, in the Out Parishes of Middlesex and Surrey, and in the 10 Parishes of the City and Liberties of Westminster. — II. OF the Number of Persons who, in the same Year having died in the Workhouses of the said Parishes, were buried at the Parish Expense. — III. OF the Number of Persons who, in the same Year, having died in the Workhouses of the said Parishes, were buried at the expense of their Friends. — IV. OF the Number of Persons who, in the same Year, having died elsewhere than in the Workhouses of the said Parishes, were buried at the Parish expense. — V. OF the Number of Persons who, in the same Year, died in the Workhouses of the said Parishes, and were buried at the Parish expense, and whose funerals are not known to have been attended by any Relation.

PARISHES.	I. Died in the Workhouse.	II. Died in the Workhouse, and buried at the Parish expense.	III. Died in the Workhouse, and buried at the expense of their Friends.	IV. Died elsewhere than in the Work- house, and buried at the Parish ex- pense.	V. Died in the Work- house and buried at the Parish ex- pense, but whose funeral was not known to have been attended by any Relation.
ALL-HALLOWS Barking, in Tower-street	7	7	- - -	6	1
All-hallows the Great, in Thames-street	2	1	1	4	—
All hallows, in Honey-lane	1	1	- - -	1	—
All-hallows the Less, at Coal Harbour	—	—	—	—	—
All-hallows, in Lombard-street	3	3	- - -	3	1
All-hallows Staining, in Mark-lane	3	3	- - -	3	2
All-hallows, on London-wall	7	7	- - -	5	1
St. Andrew Hubbard, in Little Eastcheap	1	1	- - -	3	—
St. Andrew Undershaft, Leadenhall-street	5	5	- - -	3	3
St. Andrew, by the Wardrobe	2	2	- - -	4	—
St. Anne, within Aldersgate	3	3	- - -	2	—
St. Anne, in Blackfriars	19	16	3	3	3
St. Austin, at the Old Change	1	1	- - -	1	—
St. Bartholomew, by the Exchange	2	2	- - -	3	—
St. Bennet Fink, in Threadneedle-street	4	3	1	—	—
St. Bennet, in Gracechurch-street	-	-	- - -	1	—
St. Bennet, at Paul's Wharf	-	-	- - -	2	—
St. Bennet Sherehog, in Sithe's-lane	4	3	1	- - -	1
St. Botolph, at Billingsgate	1	1	- - -	1	1
Christchurch, near Newgate-street	6	6	- - -	2	2
St. Dionis Backchurch, in Lime-street	1	1	- - -	2	—
St. Dunstan in the East, Tower-street	5	5	- - -	6	3
St. Edmund the King, Lombard-street	-	-	- - -	2	—
St. Faith, under St. Paul's Cathedral	4	4	- - -	2	4
St. Gabriel, in Fenchurch-street	2	2	- - -	1	2
St. George, in Botolph-lane	1	1	—	—	—
St. Gregory, by St. Paul's	3	3	- - -	6	2
St. Helen, by Bishopsgate-street	2	2	- - -	2	2
St. James, in Duke's place	2	2	- - -	2	1
St. John the Baptist, near Dowgate	-	-	- - -	5	—
St. John Zachary, in Foster-lane	1	1	- - -	1	—
St. Katherine Creechurch, Leadenhall-street	6	6	- - -	4	6
St. Laurence Jewry, near Guildhall	-	-	- - -	1	—
St. Laurence Pountney, in Cannon-street	1	-	1	—	—
Carried forward	89	82	7	81	35

Appendix, N° 18—continued.

PARISHES.	I. Died in the Workhouse.	II. Died in the Workhouse and buried at the Parish expense.	III. Died in the Workhouse, and buried at the expense of their Friends.	IV. Died elsewhere than in the Work- house, and buried at the Parish ex- pense.	V. Died in the Work- house and buried at the Parish ex- pense, but whose funeral was not known to have been attended by any Relation.
Brought forward - -	89	82	7	81	35
St. Margaret, in Lothbury - -	—	—	—	—	—
St. Margaret Moses, in Friday-street - -	2	- -	2	—	—
St. Margaret, in New Fish-street - -	—	—	—	—	—
St. Margaret Pattens, in Rood-lane - -	1	1	—	—	—
St. Martin, in Ironmonger lane - -	2	1	1	1	—
St. Martin, at Ludgate - -	4	4	- -	- -	4
St. Martin Outwich, Threadneedle-street - -	- -	- -	- -	1	—
St. Martin Vintry, near College Hill - -	2	1	1	1	1
St. Mary Abchurch, in Abchurch-lane - -	- -	- -	- -	6	—
St. Mary-le-bow, in Cheapside - -	—	—	—	—	—
St. Mary Colechurch, in Cheapside - -	- -	- -	- -	3	- -
St. Mary Hill, near Billingsgate - -	1	1	- -	1	—
St. Mary Magdalen, in Milk-street - -	- -	- -	- -	1	1
St. Mary Magdalen, in Old Fish-street - -	1	1	- -	- -	1
St. Mary Somerset, at Broken Wharf - -	1	- -	1	—	—
St. Mary Staining, near Noble-street - -	1	1	—	—	—
St. Mary Woolnoth, Lombard-street - -	3	2	1	1	1
St. Matthew, in Friday-street - -	- -	- -	- -	2	—
St. Michael, in Cornhill - -	2	2	- -	1	—
St. Michael, at Queenhithe - -	1	1	- -	- -	1
St. Michael-le-Quern, Cheapside - -	1	1	—	—	—
St. Michael Royal, on College-hill - -	- -	- -	- -	3	—
St. Michael, in Great Wood-street - -	2	2	—	—	—
St. Nicholas Acons, in Lombard-street - -	1	1	—	—	—
St. Nicholas Coleabby, Old Fish-street - -	—	—	—	—	—
St. Nicholas Olave, Bread-street-hill - -	—	—	—	—	—
St. Olave, Hart-street, Crutched Friars - -	3	2	1	3	1
St. Olave, in the Old Jewry - -	—	—	—	—	—
St. Olave, in Silver-street - -	1	1	- -	- -	1
St. Peter, in Cheapside - -	1	1	- -	1	1
St. Peter, in Corahill, - -	2	2	- -	- -	1
St. Peter, near Paul's Wharf - -	- -	- -	- -	1	—
St. Peter-le-Poor in Broad-street - -	4	4	- -	4	2
St. Stephen, in Coleman-street - -	7	6	1	1	—
St. Swithin, at London-stone - -	2	1	1	2	—
St. Thomas-the-Apostle, Queen-street - -	- -	- -	- -	5	—
Trinity Parish, Trinity-lane - -	1	1	- -	- -	1
St. Vedast, in Foster-lane, Cheapside - -	- -	- -	- -	1	—
St. Andrew, in Holborn, and St. George the Martyr }	79	63	16	50	50
St. Bartholomew the Great, West Smithfield - -	6	4	2	- -	5
St. Bartholomew the Less, by the Hospital - -	—	—	—	—	—
St. Botolph without, Aldersgate - -	15	13	2	2	—
Carried forward - -	235	199	36	172	106

Appendix, N^o 18—continued.

PARISHES.	I. Died in the Workhouse.	II. Died in the Workhouse, and buried at the Parish expense.	III. Died in the Workhouse, and buried at the expense of their Friends.	IV. Died elsewhere than in the Work- house, and buried at the Parish ex- pense.	V. Died in the Work- house and buried at the Parish ex- pense, but whose funeral was not known to have been attended by any Relation.
Brought forward - - -	235	199	36	172	106
St. Botolph without, Aldgate - - -	23	21	2	16	10
St. Botolph without, Bishopsgate - - -	45	37	8	37	6
St. Dunstan in the West, Fleet-street - - -	13	12	1	4	1
St. George the Martyr, in Southwark - - -	74	68	6	124	*
St. Giles without, Cripplegate - - -	48	38	10	35	7
St. John, in Southwark - - -	24	17	7	-	17
St. Olave, in Southwark - - -	34	31	3	74	20
St. Saviour, in Southwark - - -	67	54	13	74	16
St. Sepulchre without, Newgate - - -	52	47	5	14	*
St. Thomas, in Southwark - - -	2	1	1	1	1
Trinity Parish, in the Minories - - -	3	3	-	2	-
St. Anne, in Middlesex - - -	15	14	1	20	13
Christchurch, near Southwark - - -	21	19	2	22	*
Christchurch, Spital Fields, in Middlesex - - -	70	58	12	74	40
St. Dunstan, at Stepney { Ratcliff - - -	25	20	5	40	5
{ Mile-end Old Town - - -	32	30	2	4	-
{ Mile-end New Town - - -	21	13	8	-	-
St. George, in Middlesex - - -	114	102	12	68	90
St. George, Bloomsbury, and St. Giles in the Fields, Holborn } - - -	353	285	68	190	35
St. James, at Clerkenwell - - -	104	97	7	44	30
St. John, at Hackney - - -	40	32	8	66	17
St. Katharine, near the Tower - - -	18	10	8	-	10
St. Leonard, in Shoreditch - - -	139	102	37	13	35
St. Luke, Middlesex, in Old-street - - -	105	70	35	7	26
St. Mary, at Islington - - -	44	34	10	9	*
St. Mary, at Lambeth - - -	155	129	26	-	*
St. Mary Magdalen, Bermondsey - - -	81	65	16	69	23
St. Mary, at Whitechapel - - -	200	183	17	79	*
St. Matthew, at Bethnal Green - - -	144	122	22	1	*
St. Paul, at Shadwell - - -	38	34	4	57	*
St. Anne, Westminster, near Soho - - -	26	18	8	-	*
St. Clement Danes, within Temple Bar - - -	53	38	15	25	*
St. George, by Hanover-square - - -	177	141	36	85	18
St. James, in Jermyn-street, Westminster - - -	171	138	33	44	20
St. John the Evangelist, Westminster, and St. Margaret, in Westminster - - -	168	148	20	339	84
St. Martin in the Fields - - -	125	99	26	72	64
St. Mary le Strand - - -	8	7	1	3	7
The Precinct of the Savoy - - -	-	-	-	-	-
St. Paul, in Covent Garden - - -	27	27	-	7	15
St. Mary-le-bone - - -	424	340	84	161	85
Liberty of Old Artillery Ground - - -	3	3	-	-	3
Norton Falgate - - -	4	4	-	-	1
Limehouse - - -	24	23	1	-	*
All-Saints, Poplar - - -	37	34	3	-	*
Bow - - -	10	9	1	-	*
Bromley - - -	4	4	-	-	*
Edmonton - - -	11	11	-	-	7
Enfield - - -	6	6	-	6	3
St. Mary, Stoke Newington - - -	3	3	-	-	-
Kensington - - -	48	36	12	77	1
Chelsea - - -	69	62	7	-	-
Putney - - -	7	5	2	10	5
TOTAL - - -	3,744	3,103	541	2,145	821

Note:—The sixteen Parishes in this List, marked with an asterisk (*), not having made the Return required in Column V.; the same taken by estimate, in the proportion to the whole which is exhibited in those Parishes which have made the required Return, would give an addition to Column V. of 287 bodies

821

287

1,108

Note also, That no Returns have been received from 33 of the Parishes lying within the Bills of Mortality.

715

Appendix, N° 19.

COMMUNICATION from Mr. Brookes, dated Theatre of Anatomy, Blenheim-street, 10th November 1823, to Sir Astley P. Cooper, Bart.

Appendix, N° 19.

Theatre of Anatomy, Blenheim-street, 10th November 1823.

My Dear Sir Astley,

IN answer to your application, relative to the best means of procuring subjects for the Anatomical Schools, I beg leave to notice, that, from the very disorganized state of the system at present pursued by the resurrection men, little is to be expected from their services. Indeed, if from either of the modes (hereafter mentioned) an ample supply could be obtained, it would be more advantageous to desist from employing them altogether.

To enumerate some of their practices: 1st. A most infamous plan has lately been practised by several resurrection men, of breaking open the doors of out-houses and dead houses, where the bodies of suicides are deposited, previous to a coroner's inquest being held, and thus committing a felony to procure them.

2dly. They are in the habit of destroying the tombs, vaults, and expensive coffins of the more wealthy part of the community, to obtain their prey.

3dly. Violent quarrels almost always ensue, when two opposing parties meet in a cemetery, which by rendering all liable to detection, tends much to increase the alarm that the public experience from their depredations; and lastly, from the number of searches by warrants, &c. that almost daily take place in our premises, (for to speak individually, I have had several subjects seized by police officers, three within the last month, for which I had paid large sums) it is to be presumed, that after receiving the money from an anatomist for a body, an information is subsequently laid against him by one of the party; whilst another, pretending to be a relative, claims the subject, or re-stealing it, afterwards sells the same again, at a different anatomical theatre.*

The exactions, villainy and insolence, of many of the long established resurrection men are such, that I have for some time past, ceased to employ them; in consequence, my school has a very precarious and scanty supply; and that, only from strangers and novices not able to cope with those desperadoes, who have had an *entré* by means of grave-diggers, into the various burial grounds in and near the Metropolis, for a very considerable period.

Here, allow me to call to your recollection, the following fact, of Mr. Smith, one of your pupils, who subsequently attended a summer course of my lectures. This gentleman being engaged alone in dissecting in the Borough, a resurrection man entered the apartment, and immediately proceeded to cut up the subject, with which he was then occupied, threatening at the same time to assassinate Mr. S. should he offer the least resistance. I might further remark, that I almost owe my existence to the proximity of a police office; for on more than one occasion, in consequence of commotions raised by these ruffians, my whole premises would have been laid waste, were it not for the prompt and friendly interference of the magistrates in the vicinity, particularly of Sir Robert Baker.

Our object then, ought to be, in my humble opinion, to supersede the present very imperfect, extremely expensive, and (to speak the truth) illegal mode of supplying the London Anatomical Theatres, and to substitute for it another effective, cheap and lawful one, so as to preclude the necessity of our students migrating to Paris; to which city, owing to the facility with which subjects are there procured, very many of the most wealthy of my class, as well as of the classes of other professors, are going daily to pursue their anatomical studies; unless we can effect this change, this migrating will, at no great distance of time, be the entire ruin of the London schools, whose high reputation for Anatomy, has heretofore been so decidedly and justly celebrated.

At this time probably, there are about 150 students attending my lectures daily, and probably as many more will enter during the following ten months.

We may calculate, that there are 700 more young gentlemen attending the other Anatomical classes in town, which will be found to be a very moderate computation; for there are always many hundreds annually frequenting the Anatomical and Chirurgical lectures in the Borough, in a great measure, attracted by your talents; and the distinguished abilities also of the professors of St. Bartholomew's and the London hospitals, secure the attendance of several hundred more pupils; to these are to be added, those of all the other established Anatomical Theatres in London. Now, presuming that according to the previous statement, each student expends on an average two pounds per week only, (and should a few spend less, the majority are far more lavish) multiply 2,000 by 52, you will obtain a result of one hundred and four thousand pounds, yearly distributed amidst the middling classes of society in the vicinity of our Anatomical Theatres, principally for sustenance and other necessities; and, lastly, there are the fees to hospitals and professors, who, being liberally supported by their pupils, are again enabled to maintain costly establishments, or to promote science to an unbounded extent.

Let me now call to mind, the plan that I had the honour of so strongly urging to you several years ago, viz. that of importing subjects from Paris, and which at your suggestion, was relinquished just as it was about to be carried into execution, for which no doubt, you had cogent reasons.

On this mode, nevertheless, I did myself the honour of addressing a letter to Lord Sidmouth. I also wrote about the same time, to the Lords of the Council; I likewise applied to Baron Cuvier

* A female subject lately taken from my house, was, after the lapse of a few days, sold to another Anatomist.

Appendix, N^o 19,
(continued.)

Cuvier on this business, and have since addressed Sir Charles Stuart in Paris, through the medium of Dr. Hyde, physician to the embassy, and am assured that an application was made at my instance, to the French government, for permission to import subjects.

This, then, is still a desideratum, and I am convinced, may be carried into effect.

2dly. Subjects may be procured with extreme facility in Ireland, not only at Dublin, but in Cork and other large cities in that kingdom.

3dly. If the governors and directors of eleemosynary establishments in London and its vicinity (indeed all over the empire) could be induced to give up (secretly) the bodies of those dying friendless in such establishments, all the Metropolitan schools might be furnished with more than a sufficient number of subjects for dissection, without harrowing up the feelings of relatives, or those of the public.

Likewise the bodies of all convicts dying in prison or under confinement, in any part of Great Britain, without friends to inter them, might be given up.

And permit me, Sir, further to add, that all criminals who forfeit their lives to the offended laws of their country, being friendless, might be given up by the sheriffs for dissection. For this purpose, probably, an Act of Parliament may be necessary.

In fact, the bodies of all those who are supported by the public, either in prisons, hospitals, infirmaries, or elsewhere, and die friendless, might, without at all outraging the feelings of mankind, be privately devoted to the dissecting rooms.

There are also those who die without friends in naval and military hospitals; such subjects have found their way into my dissecting room after sepulture, and, I presume, into those of other Anatomists.

Thus much for what may be done hereafter; now for the present moment. Would it not be judicious in our government to issue instructions to the magistrates, overseers, &c. for police officers, patrols, constables, watchmen, and other nocturnal guardians, to allow even the present resurrection men to proceed with the dead bodies which they may have procured, to their destination; and lest on this latitude being given, a door should be opened for murder, Anatomists should hold themselves responsible for at least the name and residence of the party bringing the same, and also enter into an engagement not to pay for any subject in future until after the space of twenty-four hours from the delivery of such subject or subjects.

Now presuming that the Secretary of State for the Home Department would permit the importation of subjects from France, Ireland, or any other place, I think that I could devise a certain mode, with extreme facility, of preventing all contraband traffic that might be suspected, should such attempt be made. As to the presumed terror of disease being propagated, I appeal to your judgment and extensive experience, whether we are not totally unacquainted with any contagion being so communicated, except in some rare instances of variola: this our dissecting rooms prove, as well as the general good health of the resurrection men themselves, who in the first instance remove the bodies from their confined situation in coffins, and come closely in contact with, and handle them, when they are frequently in a state of decomposition, with impunity; also in a less degree, undertakers and nurses do the same necessary offices, equally secure from every danger.

Of all the numerous students who have been educated at any theatre, there is but one solitary instance of death occurring from dissection, and that was in the case of Dr. Walsh, who unequivocally destroyed himself by the very mistaken manner in which he treated his malady some twenty years ago, as you most probably know.

The Court of Examiners of the Royal College of Surgeons will not (very laudably) receive the certificate of a student, who has not repeatedly dissected the human body, nor is there any professional man who knows the absolute necessity of such reiterated practice better than yourself. How then is the object to be acquired? How are all the students destined for naval and military service to obtain sufficient practical Anatomical knowledge, except by one or more of the preceding modes, or by others better devised than my feeble talents have been able to suggest.

Sir Astley P. Cooper, Bart.
&c. &c. &c.

My dear Sir,
Your's, most faithfully.

Appendix, N^o 20.

Appendix, N^o 20.

COMMUNICATION from Mr. John Watson, Secretary of Apothecaries Hall;
dated May 14th, 1828.

ON an average, during the last seven years, about 400 Students have been examined annually by the Court of Examiners at Apothecaries Hall. These have not all been educated in London; many have been in attendance at Edinburgh; some have been wholly educated at Manchester; and of late, several English students have received their instructions from teachers in Dublin. No young men come before the court better qualified in every respect, than those who have been entirely educated at Manchester, where excellent lectures of every branch of medicine are given by very competent teachers; and the Manchester infirmary affords, under the physicians belonging to it, most ample opportunity for the acquirement of practical knowledge.

The ready access to Dublin by the steam packets, the easy rate of living, and the facility with which subjects for dissection are procured there, have of late induced very many students

students from Liverpool and its neighbourhood to go to Dublin to prosecute their medical studies.

In the year 1815, when the Act for better regulating the practice of Apothecaries in England and Wales, was passed, there were in all England only six schools of Anatomy (except those at Oxford and Cambridge); at the present time there are twenty schools in which Anatomy is taught, and dissection carried on; viz. twelve in London, and eight in the provinces*. The country schools are as follows:

At Manchester, three; conducted by Mr. Thomas Turner, Mr. Joseph Jordan, and Mr. John Jesse.

At Liverpool, two; conducted by Mr. Formby and Mr. William Gill.

At Birmingham, one, where Mr. S. Cox is the teacher.

At Bristol, one; by Dr. Wallace.

At Sheffield, one, where lectures are given by Mr. Wilson Overend.

And an application has also been made from Leeds, by Mr. Robert Baker, that the court would receive him into the number of recognized teachers.

Thus since the time when the Act was passed, fourteen new schools of Anatomy have been added to those before existing.

The Court of Examiners have not recognized the country schools, without ample proofs of the zeal and competence of the teachers from persons the best qualified to appreciate their talents and industry. The Court have witnessed, with satisfaction, the establishment of these schools in the populous towns of the provinces, because they afford to the young men destined for the medical profession, opportunities of acquiring information in that gradual and consecutive way, (under the guidance and control of their parents or masters), which is best calculated to be of advantage to them, and so different from that hurried course of education, which too many are obliged, by circumstances, to submit to in a six months residence in London. The last regulations of the Court of Examiners, by directing a consecutive course of study, will, it is hoped, be productive of infinite good.

Although the court do not require testimonials of their candidates having dissected, for the reason already assigned, as arising out of the existing state of the laws, they examine all candidates in Anatomy, and most particularly in the Anatomy of the thorax, of the abdomen, and of the brain, as being the parts most interesting and most important to the scientific practice of medicine.

I do not know that any documents are in existence, from which an accurate estimate can be made of the number of general practitioners in England and Wales, but think it cannot be less than 10,000. If this be taken to be about the number, and we suppose the medical life of every one who passes his examination to be 25 years on the average, 400 persons will every year be required to keep up the present number of general medical practitioners, which is rather more than the average of the number passed at the Apothecaries Hall during the last seven years†, but something less than the number passed in the last two years.

It is presumed, that with very few exceptions, every person who passes his examination before the Court of Examiners, and settles in practice, does so as a general practitioner; that is to say, as a person who practises in surgery, in medicine, and as an accoucheur; this is universally true, as regards the country—the exceptions apply only to London; but even here, the number of those persons who practise as apothecaries only, is diminishing every year; and it may be observed also, that it is in London only, with a few exceptions, that any persons are found who practise surgery only; the union of the two characters of surgeon and apothecary prevailing every where else, and forming the general practitioner.

I do not think the number of students annually in London can exceed 700, as few of them remain a second season.

John Watson.

May 14th, 1828,

Appendix, N° 21.

CASE extracted from the 2d Volume of Term Reports, page 733.

Appendix, N° 21.

THE KING against LYNN.

THE defendant having been convicted on an indictment, charging him with entering a certain burying-ground, and taking a coffin out of the earth, from which he took a dead body, and carried it away for the purpose of dissecting it: Monday, Nov. 24th 1788.

Bond,

* The same increase has also taken place in the teachers in other branches of study connected with medicine; and medical students in London have, since the passing of this Act, been obliged to attend to branches of knowledge before that time greatly neglected by the great majority of them, viz. chemistry, and materia medica; and all are now under the necessity of attending to the Physician's Practice, which not one in fifty thought of doing before 1815.

† Since the 1st August 1815, more than four thousand persons have been examined at Apothecaries Hall as to their skill and abilities in the science and practice of medicine. An accurate register has been kept of these persons, by reference to which, it can at once be seen where every person served his apprenticeship, what course of study he pursued afterwards, and at what school. An account is kept also of the persons rejected, and of the reasons for such rejection.

Appendix, N° 21,
(continued.)

Bond, sergeant, now moved in arrest of judgment, on the ground that the offence was not cognizable in any court of criminal jurisdiction: if it be any crime, it is of ecclesiastical cognizance. The crime imputed to the defendant is not made penal by any statute; the only Act of Parliament which has any relation to this subject is that of 1 Jac. 1, c. 12, (a), which makes it felony to steal dead bodies for the purposes of witchcraft; but that clearly cannot affect the present question; and the silence of Hale, Hawkins, and Stamford, upon this subject, is a very strong argument to shew that there is not any such offence cognizable in criminal courts. In 3 Inst. 203, Lord Coke says, "It is to be observed, that in every sepulchre that hath a monument, two things are to be considered, viz.; the monument, and the sepulture or burial of the dead; the burial of the *cadaver* is *nullius in bonis*, and belongs to ecclesiastical cognizance; but as to the monument, action is given at the common law for defacing thereof." So that it was also the opinion of Lord Coke, that the present charge is not the subject of an indictment in a criminal court. There is an instance in 3 Inst. 45, of a person being taken with the head and face of a dead man, with a book of sorcery, and was brought into the King's Bench, but no indictment was preferred against him, and the only crime imputed to him was that of being a sorcerer. And all the writers on this subject have considered the injury which is done to the executors of the deceased by taking the shroud, and the trespass in digging the soil; taking it for granted that the act of carrying away a dead body was not criminal.

Garrow, who was to support this motion, mentioned that perhaps the circumstance stated in this indictment, of the defendants taking the body for the purpose of dissection, might differ in this from the common case of taking up dead bodies for any indecent exhibitions; and on the court asking, whether this question had not been considered in the case of one Young a few years ago, he observed that this case was very distinguishable from that; for there the master of Shoreditch workhouse, a surgeon, and another person, were indicted for conspiracy to prevent the burial of a person who died in the workhouse. But—

The Court said, that common decency required that the practice should be put a stop to; that the offence was cognizable in a criminal court, as being highly indecent, and *contra bonos mores*; at the bare idea alone of which nature revolted;—that the purpose of taking up the body for dissection did not make it less an indictable offence; and that, as it had been the regular practice of the Old Bailey, in modern times, to try charges of this nature, many of which had induced punishment, the circumstance of no writ of error having been brought to reverse any of these judgments, was a strong proof of the universal opinion of the profession upon this subject. They therefore refused even to grant a rule to shew cause, lest that alone should convey to the public an idea that they entertained a doubt respecting the crime alleged. But inasmuch as this defendant might have committed the crime merely from ignorance, no person having been before punished for this offence, they only fined him five marks.

Appendix, N° 22.

Appendix, N° 22.

The KING *against* Cundick, Undertaker, for selling and disposing of the Body of an executed Felon to be dissected, tried at Kingston Lent Assizes, 1822, coram Graham. Extracted from the First Volume D. & R. Nisi Prius Reports, p. 13.

The KING *against* CUNDICK.

THIS was an indictment at common law for a misdemeanor. The first count stated, that on the 10th of September, in the second year of the reign, one Edward Lee was publicly executed at the parish of St. Mary Newington, in the county of Surrey; that on the day and year aforesaid, in the parish and county aforesaid, one George Cundick, of, &c. undertaker, was retained and employed by William Walter, the keeper of the gaol in and for the said county, to bury the body of the said person so executed, for certain reward to be therefore paid to the said G. C., by and on behalf of the said county, and in pursuance of the said retainer and employment, the body of the said person so executed as aforesaid was then and there delivered to the said G. C. for the purpose of being so by him buried as aforesaid; and it then and there became the duty of the said G. C. to bury the same accordingly; but that the said G. C. being an evil disposed person, and of a most wicked and depraved disposition, and having no regard to his duty, nor to religion, decency, morality, or the laws of this realm, did not nor would not bury the said body so delivered him as aforesaid; but on the contrary thereof, on the 11th September, in the year aforesaid, at, &c. aforesaid, unlawfully and wickedly, and for the sake of wicked lucre and gain, did take and carry away the said body, and did sell and dispose of the same, for the purpose of being dissected, cut in pieces, mangled, and destroyed, to the great scandal and disgrace of religion, decency, and morality, in contempt of our Lord the King and his laws, to the evil example of all other persons in like cases offending, and against the peace," &c.

There were three other counts, slightly varying the charge, but all stating that the defendant had sold the body for lucre and gain, and for the purpose of being dissected. Plea, Not Guilty, and issue thereon.

The evidence in support of the prosecution was in substance this:—That the keeper of the county gaol had authority to employ an undertaker to bury the body; that he did employ the defendant to bury it, and paid him the usual fee; that the body was given into the possession of the defendant's servants, and that he himself had acknowledged it had come to his house; that when the relatives of the deceased applied to see the body, the defendant

defendant told them it was already buried; that upon being sent for by the gaoler to explain his conduct, the defendant evaded going, or giving any explanation; that several days after the day when he declared the body had been buried, defendant clandestinely went through the ceremony of burying a coffin filled with rubbish; that he was seen in the night time removing a heavy package from his own house into a hackney coach; and that the body was afterwards found at a surgeon's, in progress of dissection, and identified as the body of Edward Lee.

On the part of the defendant, two objections were taken; first, that the indictment throughout was (and upon general principles,) bad, as a perfect anomaly in the history of criminal pleading. With the exception of the few formal words at the commencement and conclusion, there was not an expression in it that at all resembled the language of an indictment. It was to all appearance and effect, a declaration *in assumpsit*, instead of an indictment for a misdemeanor. But second, if the indictment could be held good, it was manifestly unsupported by the evidence, in three several particulars, for it stated in all the counts, that the defendant had sold the body, that he had sold it for lucre and gain, and that he had sold it for the purpose of being dissected. Now there was no evidence in support of any one of these averments. The only evidence was, that the body was not buried, but that it was found at a surgeon's; and without the production of the surgeon, and his testimony that he had bought the body of the defendant for money and for the purpose of dissection, the jury could not be asked to infer or presume three such important allegations against a defendant, and the indictment therefore entirely failed upon evidence brought forward.

The learned Judge, however, overruled both objections, leaving it to the defendant's counsel to reserve them for another place, where they might have the opportunity of moving them in arrest of judgment, if the defendant should be convicted.

The Jury found the defendant guilty.

Nolan and Comyn, for the prosecution.

Adolphus, Turton, and Ryland for the defendant.

The objections were not renewed, when the defendant was brought up for judgment.

Appendix, N° 23.

EXTRACT from a Report of the Trial of *John Davies* and others, of Warrington, for obtaining the Body of *Jane Fairclough*, which had been taken from the Chapelyard at Hill Cliff, in October, 1827;—tried at Lancaster, at the Spring Assizes, 1828. Printed by E. Smith & Co. Liverpool. 1828.

Appendix, N° 23.

Lancaster Assizes, Nisi Prius Court; Friday, March 14, 1828.

Mr. Brown opened the case against John Davies, Edward Hall, William Blundell, Richard Box, and Thomas Ashton.

Mr. Sergeant Jones stated the case for the prosecution.

The Indictment.

The KING against JOHN DAVIES and Others.

Lancashire, to wit.—This indictment, which was found at the Quarter Sessions held at Kirkdale on the 5th of November last, and thence removed by *certiorari*, charged the defendants in [follow the ten first counts, charging conspiracy, of which all the defendants were acquitted.]

11th Count, that the said defendants did unlawfully procure, and receive, and take into their possession, the dead body of Jane Fairclough, to the intent that the same should be unlawfully dissected, which said body has been lawfully interred at High Cliff, in the township of Appleton, after the same had been lately disinterred from the place of its lawful interment, and that at the time they so received it, they knew the said body to have been unlawfully disinterred.

12th Count, that the said defendants did unlawfully procure, and take into their possession the body of Jane Fairclough, and brought it into the town of Warrington with the intent to dissect the same, the said body having been lately disinterred from Hill Cliff, in the county of Chester, with the intent that the same should be unlawfully dissected, at the same time knowing the said body to have been disinterred.

13th Count, that the said defendants took into their possession, at Warrington, with intent to dissect, the dead body of Jane Fairclough, at the time knowing the same to have been unlawfully disinterred.

14th Count, that the said defendants did unlawfully procure, receive, and take the dead body of Jane Fairclough into the town of Warrington aforesaid, with intent that the same should be unlawfully dissected, on the 3rd of October, at Warrington aforesaid; the said body, so procured, having been lately disinterred from the place of its lawful interment, and that they at the time knew that the said body had been unlawfully and indecently disinterred against the peace, &c.

Plea—Not Guilty.

Samuel Fairclough being sworn, said, I am son of Mr. Fairclough, of Burtonwood, and had a sister named Jane, who died on the 25th of September; she was interred on the 28th at Hill Cliff, a burial-place belonging to the Baptists, in Appleton, Cheshire. I afterwards

Appendix, No 23,
(continued.)

saw the body on the 3d of October, in Dr. Moss's back yard, in Warrington. I knew the body to be that of my sister.

Cross-examined by Mr. Brougham.—My father is the prosecutor in this case, and Mr. Nicholson is the attorney. I don't know that the Dissenters' Society in London is altogether the real prosecutor, nor that my father ever offered to drop the prosecution for a sum of money. I know Broadhurst. I will swear that my father did not send him to Davies, or attempt any negotiation about dropping the matter. I suppose the Society will find what money my father does not pay.

Mr. Brougham.—I thought so: a most discreditable thing.

Mr. Baron Hullock.—What have we to do with that?

Witness.—My father was originally the prosecutor, and is so still.

Thomas Swinton was called, and said, I am a farmer at Appleton, and remember the funeral on Friday. I passed the grave on Monday, and all appeared safe. On Tuesday, on account of a report, I went and found the soil spread about, the coffin torn to pieces, and the body gone.

Pearson Chatterton.—I am a joiner, at Warrington, living about forty to fifty yards from the back of Dr. Moss's house. On the Tuesday night, about half-past eleven o'clock, I had been having my supper, and was called up stairs by my wife, when I saw three men carrying a package, or hamper, towards Dr. Moss's back premises. I noticed the men as much as I could, though I cannot say who they were; but I believe Box was one of them. His dress was such as I had generally seen him in. His size, also, strengthened my belief. I was looking through my bed-room window. My wife was with me, but is not here, not being in a fit state for travelling. They went directly to the hole in the back wall, the shutter of which was opened, and put the hamper, or package, through it. One of them went through the hole, and the others came away. One of them looked about, as if to see whether they were observed. It was very moonlight.

To the Judge.—The window is on the first floor. I have known Box for some years. I was born in Warrington. Box has lived there some years. He was dressed in a light coat and light stockings. I can't say there are other persons similarly dressed. He is a tallish man. The dress was remarkably light; the dress of the others was darker. From their mode of carrying the luggage, I thought it was a hamper.

William Gregson.—I am a servant to Dr. Moss. On the Tuesday I received orders from my master. There is a sort of door, or trap, into the back lane. I went, about half-past eleven at night, and opened it. Blundell, and another man whom I don't know, came. They brought a package, which was carried to a room in the garden; it was a sack, and a body in it, the same which was afterwards shown to young Fairclough. Blundell came into the yard, the other went away. I know Mr. Davies. I have no knowledge or belief as to the other person. I had met Davies in the horse-market; he told me they were bringing a body to our house. I was going to look for Dr. Moss about half-past eleven. Davies retired with me, and waited till the body was brought; he was in the garden when it arrived. After we had carried the body to the room in the garden, we met Dr. Moss coming into the yard gate. We all returned, and opened the sack, and laid the body upon the table. Davies is an apprentice to the dispensary, and Blundell, an apprentice to a stationer. They staid to take a glass of ale with Dr. Moss. The body remained until the following evening, when Mr. Nicholson came. The body was shown to him, and to Fairclough.

Cross-examined by Mr. Courtenay.—It was not Robert Blundell. Robert was charged with this, but I swear it was William. The first I had seen of him that night was at the hole in the back wall.

Re-examined.—Robert belongs also to the dispensary.

Paul Caldwell.—I was deputy-constable of Warrington last October. I found Box in custody at my house on Thursday morning. I was from home when he was brought. I asked him what he was brought there for. He said, about the body they had found. I said, I hope you have nothing to do with it. He said, "No further than helping to carry it: I was asked to assist in carrying a bundle or hamper from Bellion's cellar (in an empty house in Sankey-street) to Dr. Moss's, and that was all I had to do with it." He used to be a publican, and was then an hostler or a housekeeper. There is a car, but his son's name is upon it.

Dr. Albert Parry Moss.—I am a physician at Warrington; the defendant Davies is an apprentice at the dispensary; he called at my house on Tuesday, the 2d October, about eight o'clock in the evening. He asked me if I would allow them the use of a room in my garden, for opening a young subject. After some further conversation I consented, and gave my servant some orders. I was out late that night; on my return, about half-past twelve, I met Davies and Blundell at the gate; they informed me, in answer to my question, that they had brought the body. We went into the room, where the body of a young woman was; it was taken out of the sack, and placed on a table; it was naked; they remained with me about half an hour afterwards. On the following day, Davies's father called upon me; and, in consequence of something I heard, the body was put into a hamper, and put into the back garden; in the evening Mr. Nicholson came, and I showed him the body.

Cross-examined by Mr. Brougham.—I have been a physician in Warrington fifteen or sixteen years. I am physician to the dispensary in which Mr. Davies is a student; he is of good character. The room mentioned is not exactly a dissecting-room, but is well calculated for one. There is a hole in the garden wall, with a door, where manure is taken out. The room was formerly a museum for my father's preparations, but was never used by me for dissection. I have studied medicine, and used dissections, but not at home. It is impossible

impossible to do without dissections. Davies is a young man; he requested permission to use the room for a body which somebody had promised to bring. The usual way for medical men to obtain bodies is from unknown persons, and in the night. I know Mr. Hall; he is in practice at Warrington, as a surgeon and apothecary; he is of good character.

Samuel Kaye.—I am clerk to Mr. Nicholson, who is clerk to the magistrates at Warrington. I attended when Blundell and Davies were upon this charge before the magistrates. Mr. Hall was present, and, after the examinations were gone through, he offered himself as a witness; I took down his evidence in writing.

To Mr. Brougham.—One of the magistrates did not offer that Hall should hear nothing more of the matter, if he would tell all. Mr. Foulkes produced him, I rather think, and Mr. Nicholson cross-examined him. I don't recollect what passed between Mr. Nicholson and Mr. Foulkes about Mr. Hall.

Cross-examined by Mr. Courtenay.—Box has brought an action, and obtained damages, for being imprisoned on this charge.

Re-examined.—Mr. Hall was not charged till after this evidence.

Mr. Brougham objected to the reading of that evidence, which was confessional, as he would show. His Lordship permitted evidence on that point, and

James Bayley, attorney, of Warrington, was sworn.—He said, I was present. The magistrate said, if distinct payment for the body to persons unknown was proved, there would be an end of that point; Mr. Hall did so. Mr. Nicholson said, Hall must speak the truth, and the whole truth.

Edw. W. Foulkes.—I was present. The magistrate said, if we could show distinctly that the parties then before him were not the persons who brought the body, and bring the man who had done so, there would be an end of the case as to them. Mr. Hall's evidence was then given with that view. Mr. Nicholson, after Hall had been sworn, said, "Now, mind, Sir, you have sworn to tell the truth, the whole truth, and nothing but the truth;" and he repeated "Now, Sir, upon your oath," several times, which I protested against, and said, such a repetition was an attack upon so respectable a person as Mr. Hall.

Mr. Baron Hullock.—I shall allow the paper to be read.

Mr. Brougham said, the inducement held out by the promise of the magistrate, rendered Mr. Hall's evidence confessional.

Mr. Baron Hullock.—It was not a promise in favour of Mr. Hall.

Mr. Courtenay begged that the name of every other person in the evidence might be suppressed, except Hall's.

Mr. Baron Hullock so ruled.

Mr. Kaye then stated the substance, as follows:—Edward Hall, of Warrington, surgeon, said he knew of a body being brought into Warrington on Tuesday evening last; he saw the body, but did not know whether it was a male or female; he could identify the man who had been several times in Warrington before, and whom he did not know. The man brought the body to a cellar lately occupied by Mr. Bellion, and it was afterwards removed to Dr. Moss's; he did not know where the body was got from; the man was paid four guineas; he did not see the young woman's funeral. A person applied to him to know whether he would pay for a body for him, as he had bought one for four guineas; he paid the man four guineas, and was authorized by the person to do so. He saw the man on Friday, and the body was brought on Tuesday morning, at five o'clock. Witness saw the body in the cellar; he merely saw an arm projecting out of the sack. The body was removed on Tuesday night, about half-past twelve o'clock. Witness merely assisted to carry it out of the yard at Bellion's, and then returned to his own house. He went merely as a spectator, and does not know whither it was taken.

Cross-examined by Mr. Courtenay.—Caldwell, who has been examined to-day, was one of the defendants in Box's action the other day.

Mr. Baron Hullock.—There is no evidence against Ashton.

Dr. Moss, re called, said bodies frequently were brought from Ireland, and foreign parts.

Mr. Brougham addressed the jury for the defendants, Davies and Hall; Mr. Courtenay addressed the jury for the defendant Blundell.

Mr. Baron Hullock, in charging the jury, said, that, to prove a conspiracy, it was not necessary that all the parties should be shown to have been together; but if, from all the circumstances of their conduct, it was to be presumed that there must have been a previous concert, that would be enough to establish the charge. But as conspiracy was an offence of serious magnitude, they should be satisfied, before finding a verdict of guilty on the former part of the indictment, that the conduct of the defendants was the result of previous concert. There was no evidence against Ashton, who must, therefore, be acquitted. As to Box, the evidence was very slight. If they thought the rest, or any of them, were in possession of the body under circumstances which must have apprized them that it was improperly disinterred, the jury would find them guilty of the latter part of the charge. Blundell's being a stationer did not relieve him from suspicion, for his brother was in the dispensary. The only bodies legally liable to dissection in this country, were those of persons executed for murder. However necessary it might be, for the purposes of humanity and science, that these things should be done, yet, as long as the law remained as it was at present, the disinterment of bodies for dissection was an offence liable to punishment. The amount of that punishment must always depend on the circumstances of the case. The only evidence against Hall was his own account given to the magistrates; they would judge whether that clearly shewed him to have had a guilty knowledge of the way in which the body had been obtained.

Appendix, N^o 23,
(continued.)

The Jury deliberated for a few minutes, and then pronounced Davies and Blundell *Guilty* on the four last counts, which charged a possession of the body, with knowledge of the illegal disinterment; and *Not Guilty* of the charge of conspiracy.

Hall, Box and Ashton were *acquitted* of the whole charge.

[From the Times Newspaper, May 19th, 1828.]

THE KING v. DAVIES AND ANOTHER.

Mr. Serjeant Jones prayed the judgment of the court on the defendants John Davies and William Blundell, who had been convicted at the last Lancaster Assizes, before Mr. Baron Hullock, of, &c.

The defendants having appeared on the floor of the court, Mr. Justice Littledale proceeded to read the learned Judge's report of the trial, from which it appeared, that the defendants were indicted, jointly with three other persons named Hall, Box, and Ashton, for a conspiracy to procure the body to be disinterred for the purpose of dissection. All the defendants were acquitted of the conspiracy; and Davies and Blundell only were found guilty of the minor offence above stated. The body in question, which was that of Jane Fairclough, the daughter of Mr. Thomas Fairclough, of Warrington, was interred on the 28th of September last, in the burial ground of the Baptist-chapel, at Hill-cliff, in the eastern part of Cheshire; and a few days afterwards it was disinterred and conveyed to the premises of Dr. Moss, a physician of eminence at Warrington. It appeared that the body had been sold by a stranger for four guineas; that the defendant Davies, who was a pupil at the Warrington Dispensary, was cognizant of the fact of the disinterment, but that Blundell, who was an apprentice of a stationer at Warrington, was concerned in the transaction no farther than in assisting in the removal of the body by night, from the place where it was deposited to that where it was intended to be dissected, and that he had done so at the request of the surgeon.

Affidavits were now put in on the part of the defendants, impugning the motives of the prosecutor, and stating, that the prosecution had been carried on with funds collected by subscriptions among the Dissenters of the town of Warrington, and by pecuniary aid from the Baptist Society in that place. Some of the affidavits also stated, that the proposals of compromise had been made on the part of the prosecutor on payment by the defendants, of a sum of 100*l*. The affidavit on the part of the defendant Davies, stated, that he was under apprenticeship in the Warrington Dispensary, and had been greatly harrassed and disturbed in his mind by this prosecution. Blundell's affidavit, stated, that he had suffered greatly on account of this prosecution—that his mind had become unsettled, and he was now in a very delicate state of health.

Mr. Brougham addressed the court on the part of the defendant Davies; Mr. Courtenay addressed the court on the part of the defendant Blundell; Mr. Serjeant Jones addressed the court for the prosecution.

Mr. Justice Bayley, in passing sentence, observed, that there could be no doubt that this was an offence calculated in the highest degree to distress the feelings of the surviving friends of persons whose bodies were thus disinterred, and the court could not, therefore, consider it a light offence; but there were degrees of guilt, and in this case the defendants were not the most criminal parties. Taking all the circumstances into consideration, the court sentenced the defendant Davies to the payment of a fine of 20*l*. and the defendant Blundell to a fine of 5*l*.

The defendants paid the money immediately, and were discharged.

Appendix, N^o 24,

Appendix, N^o 24.

(See Page. 45.)

PARISH OF ST. GEORGE, HANOVER SQUARE.

YEARS.	I.	II.	III.
	Died in the Workhouse.	Died in the Workhouse and Buried by the Parish.	Died in the Workhouse and Buried by Friends.
1818	190	143	47
1819	197	161	36
1820	158	126	32
1821	131	89	42
1822	147	106	41
1823	177	132	45
1824	142	109	33
1825	164	130	34
1826	182	140	42
1827	177	142	35
Total in 10 Years	1,665	1,278	387

R E P O R T

FROM

THE COMMITTEE

ON THE

BILL to prevent the spreading of CANINE MADNESS.

Ordered, by The House of Commons, to be Printed,
9 July 1830.

LIST OF WITNESSES.

Veneris, 18^o die Junii, 1830.

<i>Mr. William Youatt</i>	-	-	-	-	-	-	-	p. 3
<i>Dr. Anthony Todd Thomson</i>	-	-	-	-	-	-	-	8

Martis, 22^o die Junii, 1830.

[illegible]

Veneris, 9^o die Julii, 1830.

<i>William Babington, Esq. M. D.</i>	-	-	-	-	-	-	-	22
<i>Benjamin Collins Brodie, Esq.</i>	-	-	-	-	-	-	-	24
<i>Alexander Thomson, Esq. M. D.</i>	-	-	-	-	-	-	-	26
<i>John Morgan, Esq.</i>	-	-	-	-	-	-	-	28
<i>Edward Coleman, Esq.</i>	-	-	-	-	-	-	-	29
<i>Richard Frankum, Esq.</i>	-	-	-	-	-	-	-	32

MINUTES OF EVIDENCE.

Veneris, 18^o die Junii, 1830.

MR. ALDERMAN WOOD,

IN THE CHAIR.

Mr. William Youatt, called in; and Examined.

WHAT is your capacity?—Veterinary Surgeon.

Where do you reside?—No. 3, Nassau-street, Middlesex Hospital.

Have you been much acquainted with dogs?—Yes.

Do you practise much in the curing of Dogs?—My practice has been rather peculiar on that point; I attend to all domestic animals, Dogs particularly.

For how many years have you practised it?—Nineteen years.

Have you seen many instances of dogs affected with hydrophobia?—Yes.

Do you consider there has been any great increase in the disorder within the last four months?—Yes.

State your grounds for it?—I have seen within the last four months more than I have seen in any eighteen previous months.

Do you attribute that to the state of the climate?—I am unable to answer the question, as my account of it would be merely conjectural.

State what you think is the cause of that increase?—The disease has arisen solely from the bite of other mad dogs; and more dogs than usual of ferocious habits had become rabid.

Have all those dogs which have been brought to you for cure been bitten?—I have seen a good many brought me supposed to be rabid, that were not so.

Had those dogs any bite upon them?—To that I cannot speak.

You can tell whether you perceived a bite upon them?—With regard to that, I have often examined dogs which had been rolled over, and apparently attacked, and could find no mark upon them, yet they had become rabid. Dogs are covered with hair; it is almost impossible to find a small puncture.

Does the wound generally heal before the disease appears?—That depends upon the nature of the wound, and the time of the appearance of the disease.

In what state were those dogs, generally, when they were brought to you, as to temper and appetite?—I hardly know to what you refer.

Were they moping and melancholy mad?—The great majority were in a state which the sportsmen call dumb madness, harmless, and with the lower jaw hanging down.

State what you consider the symptoms of rabies in the dog in its earlier stages?—There are two species of that disease, and the early symptoms of each are very different.

State the symptoms with regard to the dumb madness?—The early symptoms are, disinclination to food, costiveness, a peculiarity of countenance, which sportsmen would recognise: I can only describe it as a mixture of suspicion and uneasiness. The dog will occasionally attempt to eat, but he is unable to chew his food, he drops it from his mouth; the lower jaw then begins to hang down, the tongue to be protruded and to become discoloured; the thirst of the animal increases, and, I may say, is almost unquenchable.

Does he drink?—He attempts to drink; he hangs over the water, lapping it most diligently, till the water becomes covered with the saliva, but it does not diminish in quantity.

Mr.
William Youatt.

18 June,
1830.

Mr.
William Youatt.

18 June,
1830.

You did not mention when the greatest quantity of saliva appears?—There is a great deal of error with regard to that; in many cases of rabies there is no great increased discharge of saliva, and when it appears, its continuance is short.

Have you not always observed spasmodic affections in the throat when they attempt to eat or drink?—Not always; they are unable to drink.

How long does the dog go before the symptoms gradually get worse?—Probably twenty-four or thirty-six hours; then there is weakness, principally weakness behind, an uncertain staggering motion, and a peculiar change of voice.

What sort of change?—It begins with a perfect bark, and ends abruptly in a howl.

In what form does the dog die?—He gets weaker, and dies generally without a struggle; he is worn out by the irritation of the disease.

Do those dogs that are dumb mad, bite the same as the other?—Not in one case in twenty.

Have they no convulsive snapping upon them?—There is spasm frequently in the muscles of the cheek; I have not seen the champing motion of the lower jaw.

Have you ever dissected dogs that died with this description of madness?—Yes.

Have you found parts of the neck or head distended in any particular manner?—I have found the appearance about the back part of the mouth decisive of the disease.

What are the peculiarities you speak of?—The enlargement of the little prominences on the back of the tongue.

Is that the only peculiarity?—No.

Describe the other peculiarities you found on dissection?—There is inflammation, more or less, in every part of the fauces, and on what we call the epiglottis. The membrane covering the epiglottis is inflamed; and the edge of the aperture leading into the windpipe is likewise inflamed. Those are the marks that are decisive with regard to that part of the animal.

Did you ever kill a dog, and dissect it, when it was first brought to you, twenty-four hours before it would have died from the disease; and did you, in that early stage, observe the appearances in that part of which you speak?—In the early stage there is always inflammation of the fauces, perhaps not intense, but there is some.

Can you tell, from your experience, how long after the dog is bit, this begins to appear?—It is perfectly uncertain; from the sixteenth or seventeenth day, to the sixth or seventh month. The average time I take at six or seven weeks.

Did you find any thing particular in their stomach?—There is always inflammation on the stomach.

Did you find any thing particular in their stomach?—If there is not dung, hay, straw, hair, or other strange indigestible substances, there is a brownish fluid: the stomach almost invariably contains the one or the other. There are spots of extravasated blood. If I had found these indigestible substances, and much inflammation, I should at once decide that the dog was rabid: pieces of wood, coals, stones, &c. would lead me to suspect distemper, or teething.

You mentioned another species of madness besides the dumb, describe the symptoms of that?—The furious madness. The very early symptoms would be nearly the same. Dulness, disinclination to eat, costiveness, but accompanied with crossness, gradually increasing. I would take as the first indication of this crossness, the dog seizing the hand of his owner or the foot, and mumbling it, and not biting it; an inclination to bite, which his affection for his owner represses: I take that as the beginning of it. The eye then becomes bright; there is a glare which is seen in no other disease, and in a large dog it is terrifying. He labours under some delirium, watching imaginary objects, snapping at them, flying at them. He is impatient of control, made fierce at the sight of a stick, or the attempt to strike him. The howl is heard at an earlier stage, and is still more decisive of the disease. If he escapes, or is loose, he will attack every dog he can get at, and frequently other quadrupeds, but not often, except provoked, the human being. But I would say, the degree of ferocity depended on the breed of the dog, and his previous habits. The domestic spaniel and greyhound would, except under circumstances of provocation, rarely or never bite their owner.

State what are the dogs most likely to bite?—Those that are either naturally ferocious, or have acquired ferocity, particularly those which have been trained to fight.

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Do you mean a bull terrier?—The bull terrier is even worse than the bull-dog; the bull-dog is seldom disposed to bite a human being; the terrier will bite every thing.

Now state the symptoms of ferocious madness previous to the dog's death?—In ferocious madness the dog is able to eat and drink, and occasionally will both eat and drink in every stage of the disease.

You say occasionally?—In the earlier stages of the disease, in by far the majority of cases, the dog will eat. In ferocious madness he is always able to drink, and he drinks a great deal, but it is not the apparent thirst of the dog under dumb madness, because he is able to gratify his thirst; the other poor fellow cannot.

When the inclination to drink returns, there are other decided symptoms of madness?—There is always an inclination to drink, and he never loses the power to drink.

How long does he continue in this rabid state?—From four to six days.

In what state does he die?—He gradually becomes weaker, principally in the loins; the weakness increases, and he dies, as the other, almost without a struggle.

Do the symptoms, after the death of the dogs which die with the ferocious madness, differ from those that die of the dumb madness?—There is more inflammation in the back part of the mouth; there is oftener indigestible matter in the stomach, and more inflammation of the stomach; I know no other difference.

They seem merely aggravations of all the symptoms of the other?—Yes.

Did you ever dissect a dog in the early stages of ferocious madness, and was there any difference between the symptoms of the one dissected in the early stages of dumb madness?—In a dog destroyed in the early stage, there is evident inflammation, but not so intense: spots of extravasated blood are in the stomach of a dog left to die, which are seldom seen if he is destroyed in an earlier stage.

Can you, from your experience, state what produces the difference between those two species of madness, and whether you consider them merely modifications of the same disease, or distinct disorders?—Modifications of the same disease. I have found, on inoculation from a dog which died under melancholy or dumb madness, that the ferocious madness and the dumb madness have been indiscriminately produced.

Is it your opinion that hydrophobia can be produced by irritating a dog, or by any peculiar mode of treatment; such as bad food, exposure to the sun, or want of water?—No. At the Veterinary School at Alfort three dogs were selected as the subjects of some very cruel, but decisive experiments. It was during the heat of summer, and they were all chained in the full blaze of the sun. To one, salted meat alone was given; to the second, water only; and to the third, neither food nor drink: they all died, but not one of them exhibited the slightest symptoms of rabies.

Do you suppose this circumstance will predispose a dog to hydrophobia, as that a smaller quantity of virus will produce disease in a dog so treated, than in another of a more vigorous state of temperament?—I cannot speak to this from experience.

Have you ever given the virus to a dog in a rabid state, in the shape of food, to another dog, so as to be taken into the stomach?—Yes, I have.

What effect has it produced?—Not any.

Do you conceive that the virus of the rabid dog may safely be taken into the stomach of either man or animal?—Yes, if the coats of the stomach were sound.

Have you ever inoculated a dog with the virus, and shortly afterwards cut and burnt out the part?—No.

Do you think that hydrophobia can be communicated, unless the virus can be made to enter into the circulation, that is, unless the skin be punctured?—Of the skin generally I should say, no; but as to the more delicate skin of the lips and mouth, it is a doubtful question, a question to which I could not give a decisive answer; and I would give as a reason, that there are two or three cases on record. There is one of a physician labouring under hydrophobia taking leave of his children, and kissing them; one of them became hydrophobious, the disease being communicated by the kiss. I would state again, that a man died of hydrophobia, who persisted that he had not been bitten by any dog; but it was recollected afterwards, that he had been endeavouring to untie with his teeth the knot of a rope by which a rabid dog had been fastened a few weeks before; therefore it is a question I cannot answer. I attended, a fortnight ago, the eldest son of a nobleman; a little cur, a
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vermin dog, of which he was very fond, had been suffered to lick his lips. On a certain morning, when the dog came into the room with his valet, he seemed more than usually fond of his master, and insinuated his tongue into the mouth of the young man. The following day the dog did not appear well; the third day a physician, who was in attendance on the family, saw something suspicious about the animal, and requested that I might be sent for. As soon as I saw the dog, I decided that it was rabid. A consultation was then come to as to what was to be done with this young man, and we were both of opinion that it was necessary to apply the caustic to the lip, to the tongue, to the palate, and to every part which the saliva could have reached. Before, however, we absolutely determined on so severe an operation, a very eminent surgeon was consulted, and he advised that the caustic should not only be applied to those parts, but to every part of the mouth which could by possibility be got at, and the patient was most terribly punished; the caustic was applied with great severity to every part that could be reached.

In the two previous cases which you referred to, and which I presume are on record, had it been ascertained that the children had not also been bitten, and also, may not the lips of the person who tried to untie the knot have been sore?—Those are questions which I can only answer by saying, that they are related in this connection, as showing that it is doubtful whether, although the poison will not penetrate the common integuments, it may not be dangerous when received on the more delicate skin on the lips.

In this case of the nobleman's son, is the dog dead?—He was sent to me the next day, and he died the second day afterwards, rabid.

Are those instances recorded in any medical book of authority?—Yes, I believe by Dr. Mason Goode.

Is it your opinion that dogs are most likely to go mad in hot or cold weather, or under any extreme severity of weather of any sort?—I believe, in the ferocious madness the dog is more disposed to bite in hot weather than cold; the fever runs higher, and he does greater mischief; but otherwise the disease is not more likely to occur.

Have you ever rubbed the virus of the dog into another animal's skin where the skin is not punctured?—I have rubbed a piece of cotton that I had sopped with the saliva of a rabid dog on the gums and lips of a healthy dog without producing the disease; but still, when the other cases are in my memory, I would say again that I cannot answer the question you put to me before.

Do you consider that the power of communicating the infection arises in the dog immediately after the bite, or only in the earlier symptoms of the disease?—That is another question very difficult to answer. There is a case on record of a dog communicating hydrophobia ten days before there appeared to be any thing the matter with him. He did at length become rabid, though ten days before he was in perfect health. Certainly, however, the dog could not communicate the infection until his own constitution was affected, and that would not be immediately.

Finding as you did in the stomach a great quantity of indigestible matter, are you of opinion that did not in any degree increase the disease of the dog?—The depraved appetite I should consider as a symptom or consequence of the disease.

You said just now you tried the experiment of inoculation; you inoculated some dogs with virus, and then waited the progress of the disease?—Yes.

Did they all take the disease?—No.

In how many did it fail?—It would fail as often as succeed.

You could find no case rendering one dog more susceptible than another?—No; I have six dogs now under inoculation for the sake of experiment.

How soon after inoculation did the disease appear?—There is a great uncertainty with regard to that.

How was it in those cases you tried?—I should say not less than three weeks; and varying in the cases which proceeded from artificial inoculation from that to three months.

Which kind of the two, the dumb or the ferocious madness, was the commonest in those cases of inoculation?—It seemed to be a point of indifference.

Was there any difference in the time of the appearance of the two kinds; suppose you inoculated a dog, would the disease appear quicker in the ferocious madness than in the dumb?—I am not aware that it would.

Did they ever recover after the disease appeared?—No.

By no means whatever?—No.

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Not of either?—No.

Have those dogs that have been brought to you as rabid within the last four months? what sort of dogs have they generally been, belonging to people of the better class, or belonging to the poorer class?—Both; a greater proportion, perhaps, than usual of the higher class than those in a lower situation of life.

Have you seen or known of many cases of madness in dogs that are suffered to run loose about the streets without owners, and generally those which live upon the town?—Those are not the sort of dogs usually brought to me.

Have you known many instances of those dogs going mad?—Yes.

Have you many dogs that have undergone the operation of worming?—Yes, I have wormed a great many.

Do you consider it has any beneficial effect?—Not the least in the world.

Do you consider the symptoms of madness so decided that you can never be mistaken, so as to take a dog that is not mad for a dog which is mad?—No; I am bound to acknowledge that I have often been mistaken in the early stage of the disease.

Of those dogs which have been brought to you within the last four months, are you decidedly of opinion the greater majority have been mad?—I think I can safely speak to at least eighty cases of decided madness.

Within what period?—Since the end of January.

Have any of those dogs so brought to you bitten persons previously?—Yes, many of them.

State about the number that have been bitten to your knowledge?—More than thirty or forty.

Of those thirty or forty did any of them undergo operations to your knowledge?—Many of them did; of the majority, however, I cannot speak.

What operation did they generally undergo?—To those whom I knew, and who had sufficient confidence in me to permit me to operate upon them, to them I applied the lunar caustic.

Did those persons to whom you applied the lunar caustic afterwards sicken?—No.

None of them?—They are all living and well. There is one thing I would beg leave to state as a fact which I believe will bear upon the object which you have in view: I was telling the surgeon, to whom I just now referred, that I had operated on nearly 400 persons, and had been invariably in the habit of using the lunar caustic, and not one had died: his reply was, "What is your 400 compared to the number I have seen since I became connected with St. George's Hospital? myself and colleagues have operated on more than as many thousands, and to our knowledge not one has been lost." This I conceive to be a most important as well as consolatory fact.

Have those operations taken place very shortly after the bite?—I have operated as late as a fortnight after the bite.

In that case did the patient sicken?—No.

It was a severe operation, was it not?—The part was nearly healed; it was necessary to re-open it.

From your experience, have you faith in the beneficial effects of the operation by lunar caustic?—I have faith in the destruction of the part, and it is very immaterial whether it is destroyed with the caustic or the knife.

Have you known cases in which, after the application of the lunar caustic or the knife, the patient has sickened or died?—Not personally.

Do you consider the disease in the dog perfectly incurable if taken in its earlier stage?—As far as the experience of any medical man goes there is no authenticated case of cure.

Have you tried the effect of lunar caustic or excision on a dog?—Both.

In many cases?—Not in a great many; about thirty cases.

In those cases have the dogs generally gone mad, or continued well?—Some have become rabid; one I should say in three upon whom the operation has been performed has become rabid. I should trace that to the point on which I was examined before, the difficulty of discovering the bite, owing to the animal being covered with hair.

Has it ever occurred to you, that by any legislative measure the spreading of this disease of canine madness might be checked?—The only measure of which I can

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be aware, is the lessening the number of those breeds, the cur and the terrier, by which the disease is usually propagated; and particularly, I would add, in the metropolis, and indeed in every part of the kingdom putting down assemblies for fighting dogs.

Do you think it would tend to check the spread of canine madness if dogs were kept at home, and confined during the prevalence of the disease?—Certainly, because then they would not be exposed to infection.

Did an instance ever occur of a person complaining of the bite of a dog, the dog being brought to you, and you finding the dog did not die, but that the man that was affected with hydrophobia died?—No.

Dr. Anthony Todd Thomson, called in; and Examined.

Dr.
A. T. Thomson.

ARE you a Physician?—Yes.

Where do you reside?—No. 3, Hinde-street, Manchester-square.

Do you understand the complaint which is called hydrophobia?—I have seen instances of it.

Have you visited patients under that complaint?—I have.

State whether it has arisen from the bite of a dog?—In all the instances that I have seen the disease has arisen from the bite of a dog or of a cat; but in some instances of which I have read it has also originated from the bite of the wolf and the fox, as well as of the dog and the cat. I have never seen any instances of the disease produced by the bite of the wolf or the fox; those instances which I have seen have originated from the bite of a dog or a cat. I have seen only one instance from the bite of a cat.

Did that patient die?—Yes; in every case of hydrophobia that I have seen the patient has died.

Are you aware that in those instances any operation took place after the bite?—In two cases the operation of excision was performed, but nevertheless the patients died.

Was the excision performed very shortly after the bite?—Very shortly, almost immediately. In the one case, I should say, that it is probable the excision was not effectually performed; it was not deep enough. I refer particularly to the case originating from the bite of the cat. The operation was performed immediately after the bite was inflicted.

What time after the bite did those cases take place?—In the case of the cat, about six weeks; in the other cases that I had occasion to see, from five days till two months.

Have you ever attended patients who have been bitten by dogs in a rabid state, and where excision has taken place within a short period, where the patient has recovered?—In many instances the disease has not occurred; in two cases, the disease occurred after excision.

Have you, in any of those cases where the disease has not occurred, ascertained the dog was really mad?—In some instances, but not in all.

Did you ever ascertain, that when the patient had died, that the dog was not mad?—No, the dog was always rabid.

State your opinion as to when and how the disease is generated in the dog?—I scarcely feel myself authorized to give an opinion in reply to that question; but I should say, as far as my knowledge extends, that the disease in the dog has always originated from the bite of another rabid dog.

In those cases you mentioned where death occurred, do you mean the dog was mad at the time of the bite, or became mad afterwards?—At the time of the bite.

As far as your experience goes, the original cause of rabies is biting?—Yes; as far as my experience goes.

Have you any opinion which you would like to give the Committee, differing from that of your experience?—No.

Have the number of cases of hydrophobia to which you have been called in, been more numerous than usual within the last four or five months?—I have not seen one case within that period; I have heard of many, but I have not seen one.

Now as to the effect of the virus of a dog in a rabid state, do you think it could be safely taken into the stomach, provided the coats of the stomach were in a sound state?—Undoubtedly.

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Do you think that the virus might be safely rubbed into any part of the person, provided there was no puncture or cut in the skin?—I think all experience tends to make me believe so (I have had no experience of my own to form an opinion one way or the other in that respect). From the nature of the animal economy, however, and the action of the other animal passions, I should say, that rubbing the virus on a sound skin could not communicate the disease.

Two cases have been stated as being on record; one, in which a person near death from hydrophobia kissed one of his children, on which the child went rabid; the second, the case of a person untying a knot in a rope with his teeth, by which a rabid dog had been fastened up, on which he also became affected with hydrophobia; do you not think that the probability is, that in the first case the child must also have been bitten; and in the second, the lips must have been sore, to produce the effect stated?—I think, if the cases be well authenticated, that, in the first instance, there must have been a chap or some small abrasion, or some sore or ulcer on the lips of the child, and the same must have existed in the second case also; but I doubt the authenticity of both cases.

You state very confidently your opinion, that the disease can only be communicated by the virus being taken into the system by means of inoculation?—Yes; the disease can originate from no other source in man.

Is there any complaint so like it that you may mistake it for hydrophobia?—The symptoms are peculiar to itself, so that the disease cannot be mistaken by an observing physician.

Is there any complaint which ignorant people would be likely to take for that disease?—I think all cases in which hydrophobic symptoms occur, I mean in which there is a dread of water, might be mistaken for hydrophobia. It is a vulgar error that patients in hydrophobia are mad; they are not mad; there is no such thing as madness connected with the disease; it is a disease of the respirating nerves, its chief seat is in the cervical, dorsal and lumbar portions of the spinal column.

Do you think that when people having no medical knowledge tell you that a man has died of hydrophobia, it is very probable the complaint is mistaken for some other?—Very probable.

But with well-informed men such a mistake cannot take place?—No.

How long have you been in practice?—Thirty years.

In your opinion, is the disorder of hydrophobia increased much of late years?—I cannot answer that question from my personal knowledge; but I should say, that from the accounts in the newspapers, it has very much increased. The first twenty years that I was in practice, I never saw a case of hydrophobia, and scarcely ever heard of any. Within the last ten years I have seen three cases, and heard of many.

Heard of many, from whom?—From medical authority.

Do you consider that hydrophobia never arises except from the bite of some rabid animal?—Never in man.

Do you consider hydrophobia, if taken in its earlier stages, is a disorder perfectly incurable?—I can hardly comprehend that question. Do you mean by its earlier stages, after the symptoms of the disease have shown themselves?

I would rather ask, after the bite of a mad dog?—Many persons have been bitten by rabid dogs, who have never taken the disease: from personal knowledge I cannot say what average of those who have been bitten become hydrophobic; but the general feeling in the profession is, that not one in twenty that are bitten take the disease. This can be explained, in some degree, by the periods in which the individuals were bitten; for example, if ten men were bitten in succession by the same dog, it is very probable that if the first two took the disease, none of the others would take it, because the virus was wiped off from the teeth before the bites were inflicted on these eight persons.

And in biting through clothes the teeth are also cleaned?—A man is much safer who is bitten through his clothes than when he is bitten in a naked part.

Do you consider that there is no medicine nor remedy which has the power of mitigating or curing the disease?—Of mitigating there is, but not of curing. I conceive the great error in medical men, speaking with submission, has been the searching for specifics; the eager desire of obtaining a remedy to cure a disease which cannot be cured by any specific, whilst the symptoms of the disease have been very much neglected; I conceive that the difficulty of curing hydrophobia has

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arisen chiefly from that error in the profession; from professional men not studying the symptoms of the disease, but looking after specifics. In the earlier stages of hydrophobia, the disease cannot be easily detected; it resembles some fevers; but after the symptoms of hydrophobia, that is, the dread of water and the extreme sensibility of the surface, present themselves, the disease is then easily recognized to be hydrophobia, and is then incurable.

I ask you whether, if a person was brought to you who had been bitten by a mad dog, after the usual operation of excision or caustic, you would think it advisable to prescribe any medicine?—Yes; if a patient was brought to me to whom caustic alone had been applied, I should think it necessary to give him medicines, and to apply blisters over the spine; if excision had been performed by a very skilful and careful operator, I should scarcely think it necessary to give him medicine. There is a great difference of opinion among the Profession with regard to the effect of the virus being introduced into the system. My opinion is, that excision of the part any time between the infliction of the bite and the first symptom of the disease would be equally efficacious as when the bitten part is taken out immediately after the bite; but I ought to say, that my opinion upon the disease is, perhaps, peculiar. I consider that it is very doubtful whether absorption ever takes place. My reason is this, that in all morbid poisons, of whatsoever kind they may be, whether small pox, cow pox, syphilitic virus, plague, or any other morbid poison, when introduced into the system, produce their effects almost always within a limited time; hydrophobia does not. The period varies from a few hours to a considerable time; the proper inference to be drawn from that fact is, that the hydrophobic virus is not regulated by the usual laws of morbid poisons: on that account I am inclined to believe that it remains in the part that is so bitten, and the individual is safe till the habit gets into a peculiar state, which we term, in medical language, predisposing; so that the part may be advantageously excised in the intervening time.

Can you suggest any legislative measure which could be adopted for the purpose of decreasing the disease of canine madness?—I think the most feasible measure is that which must occur to every person, I mean the confinement of dogs, after the first appearance of hydrophobia in any district. I should say also, that much good would result from diminishing, very considerably, the number of the dogs belonging to the poor, by taxation, or some other measure.

Martis, 22^o die Junii, 1830.

Lancelot Baugh Allen, Esquire, called in; and Examined.

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WERE you not formerly a Magistrate at Union-hall?—Yes

For how long?—Seven years.

Do you believe that hydrophobia is particularly prevalent at this time, more so than common?—I am afraid it is.

Upon what do you ground that opinion?—From medical men I have seen, and accounts I have seen in the papers.

Are you aware there has been more than one human being affected by hydrophobia this year?—I am not.

What have you noticed yourself as regards dogs in any way, as to the number of dogs and the manner they are kept?—My own observation has gone to this extent, that there are a great number of loose dogs, who follow persons, particularly idle and disorderly persons, along the roads leading to Norwood, in the afternoon, towards the close of the day, and a very considerable number of those dogs are set at horses, particularly young horses, and there is a great deal more of that sort of mischief about the roads, than probably gentlemen who do not go much on the roads are aware of. I do not profess to know any thing about mad dogs.

Have you any suggestions to state to the Committee by way of remedying the evil complained of?—All that I have to state to the Committee by way of suggestion is, that at present there is no penalty upon any man allowing his dog to bite any body. I had, as police magistrate, a great number of cases before me, where persons were bitten by dogs, for which there is no penalty whatever; and my suggestion would be, as far as regards that, that the magistrates should have a power of inflicting a penalty where dogs bite people, from 5 s. up to as high as 10 l.

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Do you mean that to take place at all times without previous proclamation?—At all times without previous proclamation.

Mad or not mad?—Yes.

In those case where persons came before you for compensation for being bit, was there any action brought against the owners of the dogs?—I cannot tell; the cases were finished with me, and our business was so great at Union-hall, that I had not time to inquire whether there were. I will state to the Committee a single case in illustration of what I have been stating. A man appeared before me, complaining that he was bit by a dog, and it appeared that a person who was on bad terms with him met him on the Brixton road, followed by a large sheep dog; and he set that sheep dog upon this man, and worried him for twenty minutes; and the man appeared before me with his limbs torn, from his ankle to his middle, in a way that was quite horrible; and I was forced to allow the man to go, because there was no penalty attached to it; and the same man who did so was very shortly afterwards executed for horse-stealing.

Could you not, if one man sets a dog upon another, could you not indict him?—Yes; but in all these cases the remedy I would suggest would be a summary penalty.

Are you not aware, if you bring an action against a man for his dog biting you, that it is necessary to allege in the pleadings that you knew before that time the dog used to bite?—Yes.

Does not that also apply in all cases where sheep or any other animals were bitten, that you must allege that the dog was accustomed to bite?—Yes.

Do you think it is always necessary to prove that allegation?—I am not quite sure as to that; I should rather think not.

Do you see any objection in omitting that allegation in the declaration, and giving an action against any man for his dog biting you, though it was the first time, in order to obtain damages for the injury suffered?—I see none whatever; at the same time the Committee is aware that actions are very slow in their progress, and it would be in fact giving the party no remedy.

Do you think it would have a beneficial effect?—I think not.

For what purpose do the lower classes of people generally keep dogs?—A great number of the lower classes keep them as companions, and a great number as mischievous companions. I live at Dulwich, and I am in the constant habit of riding out in all hours, particularly in the afternoon, and I am frequently set on by dogs, by mischievous persons who have dogs with them. If they see horses, particularly young horses, they are in the habit of setting dogs at them. I have known repeatedly a great number of low blackguards to have set dogs on horses, particularly on young horses.

Henry Earle, Esquire, called in; and Examined.

I WISH you would be so good as to give some general information to the Committee upon the subject of canine madness; you have had opportunities of seeing such cases, particularly in one instance at my house; some spaniels were mad, and you inoculated some rabbits with the saliva of a dog that died mad; you have seen the effect?—Yes.

Have you seen any cases of mad dogs?—Several; I have opened them, and seen others examined, particularly by Mr. Youatt, who possesses a great deal of information upon the subject, perhaps more than any man I know.

What do you consider to be the cause of canine madness?—I believe, from the evidence I possess, it is in every instance communicated from one dog to another; it does not arise spontaneously.

Do you believe that the provision, the mode of treatment, want of water, or the influence of severe weather, has any effect upon dogs, and produces hydrophobia?—I think there is no decided evidence to prove that; and on the opposite side, there is a great deal of evidence to disprove it; for instance, the total absence of the disease in many parts of the world, particularly in Lisbon, where dogs are to be found to a very great extent. It is well known they are the scavengers of Lisbon, feeding on the offal.

Do you speak from general information, or are you particularly acquainted with the fact of dogs not being subject to be mad in Lisbon?—I have been informed by persons who had been long resident in Lisbon, that the disease is not known there.

*Henry Earle,
Esq.*

Henry Earle,
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Does the species of madness differ in various cases?—Dogs are affected differently; some dogs are not at all disposed to bite when they are rabid.

What is the case as to others?—Others, and particularly the fighting dogs, are disposed to bite other dogs, but not to fight.

Can you give any reason either in the temper of the dogs, or any other cause, which constitutes this difference between the two sorts of dogs?—The habits of dogs are very different. Spaniels, and dogs of that description, are not so disposed to be quarrelsome; there is no other rational reason to assign for it. The most violent dogs, the bull-dogs, and dogs of that description, when they are afflicted with rabies, merely bite and run on. Sir John Shelley's keeper informed me that he had seen a dog, which I supposed to be rabid, bite at almost every dog in the kennel, snapping at them, but not fighting with them.

In cases of rabbits, and animals that you have inoculated, have you found the same difference in the disorder?—There is a great difference; some animals have no disposition whatever to bite. The horse, when affected, has no disposition to bite; his tail is stiff, and ears erect, but he has no disposition to bite.

Do you consider madness in dogs a perfectly incurable disease?—I will not undertake to say so much; but no remedy has yet been discovered. At present there is an important question agitating the minds of many medical men with respect to this. An opinion is entertained by some that the disease can arise spontaneously in dogs, and that when communicated by inoculation from other dogs, the dogs so bitten do not become rabid; they have a disease which destroys them, but not one which renders them rabid; but this is a point which has not been satisfactorily investigated by a continuance of inoculation from one dog to another. My belief is, that it is the same disease that is propagated from one to the other.

If the former opinion is found to be true, will it not very much diminish the danger of mad dogs?—Undoubtedly; but it would be very dangerous to make such experiments, and I am not aware of any satisfactory experiment having hitherto been made.

Can you state at what period of the disorder, when the dog is affected, that virus is first capable of causing infection?—I cannot state positively; in many instances I have inquired into, from a fortnight to three weeks after the dog was bitten have elapsed before he has become affected; but generally the dog is affected in a shorter time than is the case with human subjects.

Do you consider that the dog is capable of communicating infection before the symptoms of the disease are apparent?—I should imagine not.

Have you seen many cases of persons bitten by dogs lately?—Yes; only on Saturday last there were six who applied at St. Bartholomew's Hospital, and we have had ten or twelve in the course of the week.

Have the number of persons who have applied been larger this year than before?—Certainly.

Much larger?—I should think considerably larger; but there is a great alarm prevailing, and every person who has been bitten immediately applies to have the part removed.

From the accounts given by those people, do you think that a large proportion of those were bitten by dogs which were mad, or dogs which were not mad?—In many instances it was impossible to ascertain, as the dogs were unknown to the parties.

Have there been many instances in which, according to their statement, the probability was that the dogs were mad?—In the majority of instances where the operation has been performed there was reason to suppose that the dogs were mad.

Have you in any of those cases actually known the dog to die mad?—Not lately, but I have in other instances some years ago. I can mention one instance particularly in which I was concerned, where a dog had bitten five individuals in one family, and where the animal died of the disease, and some curious circumstances occurred after its death. I inoculated two rabbits from the saliva of the dog after death, and was particularly anxious to observe the result, in consequence of one of the individuals above alluded to having been bitten five days before the part was excised; and as she was bitten very extensively in several places about her naked arms, I had reason to entertain great apprehensions as to the result. The dog was examined after death, and the stomach was found to contain dirt and rubbish, and exhibited all the phenomena of a dog dying rabid, and, as further evidence of it, the animal became perfectly paralysed in his hind quarters before he died. This was

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was one of those cases, as far as could be ascertained by symptoms during life, and examination after death, which showed that the animal died of rabies, and yet not one of the individuals who had been so bitten has since suffered from the effects of the disease. I mention this fact, because it was after an interval of five days that the part was removed. I watched the family for upwards of two years, and I have heard nothing since. The two rabbits were curiously affected, and the result of the inoculation certainly tends to throw some doubt on this having been really a case of rabies. They were inoculated at the root of the ears, and one of the rabbits speedily became inflamed about the ears; the ears became paralysed in both the rabbits. They had no power of raising them, and the head swelled very much, and extensive inflammation took place round the part where the virus was inserted, and one of the rabbits died, but without exhibiting any of the usual symptoms of the disease; the other, after a long convalescence, survived, and eventually recovered the use of his ears.

Do you not think it probable that the incision was made so deep that it would paralyze the ears?—The incisions were merely sufficient to introduce the virus: I mention the circumstance, because the appearances were very different from what took place in the rabbits that were inoculated from the dog that died at Sir John Shelley's.

The second rabbit ultimately recovered?—Yes, completely recovered, after a long convalescence. In the rabbits that were inoculated at Sir John Shelley's, they exhibited all the phenomena of rabid animals. They were confined in a place where they could procure no rubbish or dirt, and had nothing but clean wholesome food given to them; after their death, their stomachs were found full of their own fæces.

Generally speaking, in the dogs that have died rabid you have found pieces of brick, sand and dirt?—Yes; and it is an important question to ascertain whether this is to be considered as a symptom of the animal having been rabid. I believe a dog suffering from distemper will eat rubbish; it is questionable, in the instance I first mentioned, where so many persons were bitten by the same dog, whether the case was any thing more than violent distemper. We are yet ignorant with regard to many important facts in this disease as it affects dogs.

In that instance you have mentioned, it was doubtful whether it was the disease of hydrophobia?—Yes.

Did you ever know any person really afflicted with the disease to recover?—Never.

Are there other complaints which medical men of eminence are apt to mistake for hydrophobia?—I cannot say that from any thing I have myself observed: in the instances I have myself seen, the symptoms have been clearly marked, and the persons after death have exhibited all the appearances said to exist in hydrophobia.

Did you not attend a woman who was mad that bit your finger?—The first instance of hydrophobia I ever witnessed was that of a woman, from the bite of a cat. I was about to give her some ice, and she was so very eager to catch at it, that she tore my finger with one of her teeth; in consequence of which I had the piece removed immediately. Great doubts existed at that time, in the minds of medical men, whether the disease could be communicated from one human being to another, and I was laughed at very much for taking the precaution of having the piece taken out. After the woman was dead, half a dozen rabbits were inoculated from her saliva, and as far as my recollection serves, two or three rabbits died with all the symptoms of rabies.

You said you yourself never had any doubt about the disease: do you not think now medical men might mistake other complaints for hydrophobia?—I think it is quite possible: I have known an instance in which a medical student was fully impressed with the idea that he had hydrophobia, and was in a state of mental hydrophobia for twenty-four hours. I was fortunate enough in knowing that he had a great penchant for porter, and I cured him with a pot of porter, by bringing a pot of porter fresh from the tap, which he took and drank off. He was for twenty-four hours labouring under the strong impression that he had hydrophobia.

Is it not a spasmodic affection?—Yes, a dreadful spasmodic affection, and is often produced by the sight of fluids. I have seen a patient on observing a looking-glass, thrown into convulsions; and the passing of the urine in the same person produced convulsions.

How early does it take place after the bite, that the inflammation of the throat

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takes place you speak of?—I have never known any instance of the disease sooner than five weeks. There are authenticated cases recorded as late as twelve months afterwards. I knew of one instance of hydrophobia after the expiration of twelve months: a man had been bitten on the day of the anniversary meeting of some medical men at the Thatched House, and upon that day twelve months, when the same parties were assembled, he was attacked with hydrophobia.

Upon that identical day?—Yes.

Is that the only instance you know of after that length of time?—The only instance.

Had he never any medical treatment in the intermediate time?—None that I know of. I do not mention it from my own knowledge, I had the account from my father.

Do you consider that the virus of the dog's saliva becomes exhausted by the biting of many objects?—It is a matter of opinion; I should think not. There is a continued secretion; an abundant secretion of saliva would continue to flow. If many were bit in a rapid succession, the saliva might be wiped from the teeth.

I think I understood you to say you never knew of more than one instance, where the part was cut out, that the party ever became hydrophobic?—No; I have in very many instances cut the part out, but I never have known a case of hydrophobia after it was so removed.

Is not that the case when the part is burnt with caustic?—I am not so satisfied with respect to caustic, unless it be strong nitric acid.

If you have a large laceration there would be a chance of caustic not coming into the different parts?—The nitric acid acts very deeply, but other caustic, for instance caustic pot-ash, when there is any wound, becomes decomposed by the blood, and does not penetrate to the depth that nitric acid does. The nitric acid forms a dry eschar; but I prefer the knife, because in every instance where the caustic can be applied, the knife may be employed.

In all those cases where the part was excised, what was the time that elapsed after the bite was inflicted?—In one instance five days; it has frequently happened after the lapse of many hours. Once when I was bitten myself the part was not taken out of my leg till after six hours; I was so situated, that I could not have it taken out sooner.

Do you conceive that it can be ascertained with precision by a *post mortem* examination whether the animal, man or dog, died rabid or not?—I will first answer with respect to the dog, and that I have in some measure already done. I think it difficult to decide positively whether the animal does die rabid or no, nor can that question be decided until a series of experiments are made to ascertain what are the actual phenomena presented. I believe there are cases where dogs are supposed to be rabid, when they are merely afflicted with the distemper. I am doubtful of there being any appearances from which you can positively assert that the animal was rabid.

Have you seen an account of a cure lately effected by leaving the wound open to suppurate?—I have heard of the case, but there were no symptoms of the disease that manifested themselves; the symptoms of the disease were not developed. The mere circumstance of the wound having been kept open, and the person not having been affected with hydrophobia, does not show that the treatment in question was better than having the part cut out.

Might it not be tried in parts where you could not try the excision?—There are few parts to which you could apply caustic where you cannot perform excision. If you apply caustic, you must take care that the caustic is strong enough to destroy all the parts affected, but we think that the knife can with a greater degree of certainty be employed. With regard to the appearance exhibited after death in the human subject, there are but few instances of persons dying of hydrophobia in which there have not been appearances of inflammation about the fauces.

How many years have you been in practice in your profession?—I have been twenty-five years at St. Bartholomew's.

Is it your opinion that hydrophobia has increased of late years?—Certainly; and the ground of that belief is, that I have seen, living or dead, nine instances in the space of twenty-five years; and my father in the space of fifty years never saw but one.

But you have had hospital practice?—Yes, and so had my father at the same institution.

Have you seen many instances of hydrophobia in the present year?—Not one.

Have

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Have you heard of any?—I heard of one at St. Thomas's Hospital. The one at Middlesex Hospital was not hydrophobia, it was one of *delirium tremens*.

May not *delirium tremens* be mistaken for hydrophobia by ignorant people?—Yes.

Do tetanic complaints much resemble hydrophobia?—In some respects; but there is not the lock jaw in hydrophobia.

I think you said you saw nine instances in twenty-five years?—I have seen them alive, or been present at the examination after death.

Is it your opinion that the saliva of rabid animals can be taken into the stomach of a human being without danger?—I have no evidence at all upon the subject. In the instance of the medical man to whose case I alluded, he had been attending a patient who was afflicted with hydrophobia, and the patient, when in convulsions, had thrown some of the saliva over him, and he supposed that it had entered his mouth: he was under that impression; but it is well known that the poison of serpents may be introduced into the stomach of animals with safety: that experiment has been made years ago.

In some cases of rabid persons, is not the disease occasioned without any actual contact, as, for instance, similar to cases of the small pox; may not the disease of canine madness be communicated in the same way, without any actual bite; may it not be effected by the atmosphere?—I have no evidence at all of that.

Would you say, from the character of the disease, that it was not likely?—I should think not.

Have you known any instance of that?—No.

Do you confine yourself to the transmission of the disease from one dog to another?—Yes. I have no evidence upon that subject to which you have alluded, but I should doubt it certainly. The small pox may be communicated by infection, or by miasmata in the air, but I should think that such would not be the case in canine madness. The fact might be ascertained very easily, if any person could be induced to carry on a series of experiments, and really the present state of our information upon the subject requires that some such experiments should be made.

Are you able to suggest to the Committee any legislative measure which could have a good effect as to the suppression of canine madness?—Nothing but the destruction of the immense number of dogs that you meet about the streets. It is already provided that all dogs should be taxed, and their masters ought to pay for them. If all persons were obliged to have collars round their dogs, it would diminish their number considerably, but not entirely; for I had a visitation from a mad dog with a collar on about six weeks ago: he ran into my house, and I destroyed him.

Joseph Terry Hone, Esquire, called in; and Examined.

WHAT office do you hold?—I am one of the Magistrates of Union Hall.

Have you had lately a considerable number of applications from persons bitten by dogs?—Very numerous, indeed almost every day I have sat at Union Hall.

Have you, by the present law, any means of punishment for individuals that are found to be the owners of the dogs?—We know of none; we are not aware of any. I ought to correct myself; we have lately discovered in the parish of Lambeth there is a clause in the new Act of Parliament to enable magistrates to inflict a penalty not exceeding 5*l.* for allowing dogs at large after notice has been given to the party who is the owner of the dog.

Not a general proclamation?—A general proclamation, or particular notice.

Can you recollect who is to give that notice; can you tell?—The parish officers. I never knew of this clause in this bill till a short time ago. I said to my colleagues, I am very glad to find that there is a clause giving us that jurisdiction with respect to stray dogs which we so much wished for.

In such cases have you found some of the owners?—Notice has been given in that parish, but we have never acted upon it, because nobody knew of it.

The parish officers not giving the notice under the Act?—No.

In other places, which do not come under the Act, suppose a man to be bitten, you have no summary mode of punishing the owner of the dog?—None whatever. Every day we issue, upon application, a summons to the owner of the dog to come before us, to show cause why the dog should not be tied up.

Have you not had persons come before you, who, having been bitten by dogs, have undergone an operation by a surgeon?—Frequently.

Have you heard it mentioned that any of them have been afflicted with hydrophobia,

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phobia at all?—I cannot say I have; all persons coming are filled with apprehension and alarm.

Did you ever know of any mad dog?—I have not known of any mad dog. In the cases that have come before us, the parties have said they were mad, but we had no evidence before us of it.

Has there been an increase of applications for injuries done to parties by the bites of dogs, within the last two or three months?—Yes, very much indeed.

Have the owners of the dogs never made compensation to the parties bitten?—They frequently have.

Has not that been upon the recommendation of the magistrates?—Yes; we have threatened to hold them to bail, and have them committed, and if they have been good-natured people, they have said, "We have no objection to pay the poor man for the injury done;" and I have known several persons to pay 50s.

To what class of persons do these dogs generally belong?—To the lower order of people, almost all of them, I must say. I always ask the parties, "Do you pay the dog-tax?" the answer is always, "No."

Have you any power of fining for not paying the dog-tax?—We have not; it must be a surcharge.

You would find very few of the persons who appear before you as owners of dogs, are liable to pay the dog-tax; are you aware that persons must have more than six windows in their house to make them liable to the dog-tax?—I am not aware of that.

Are you aware of the law upon the subject respecting the assessment upon dogs?—I cannot say I am.

For what purpose are these dogs generally kept, for useful purposes, or merely for purposes of sport and mischief?—Sometimes useless, and sometimes kept as watch-dogs: sometimes they are perfectly useless.

Would the class of persons who keep these dogs be a class of persons who would be able to pay a small tax without inconvenience?—I should think they would.

Do you think that a tax made payable for every dog would not be found oppressive to the poorer classes who ought to have dogs?—I should think not. A few days ago a case came before me, where a poor man was bitten by a dog, and I inquired whose property the dog was, and one of the parish officers came forward and said, that that dog and another was the property of one of the paupers. I ordered the parish officers not to relieve this parish pauper any more, for as long as he kept two dogs, he did not want parish relief.

Do you think a great proportion of dogs, causing mischief to individuals, are dogs belonging to the lower class of people who have no occasion for them?—I do; it is my opinion that a great proportion of these dogs belong to the lower orders.

Have you had any instances of dogs used with trucks biting other dogs or people?—I have, sometimes.

Have you the power of ordering relief to be withheld from the paupers in those cases?—Yes, we think so; if we have not the power, we have the influence; we think it a fair thing to the parish that they should not be burthened with the expense of a pauper who can afford to keep two dogs.

Do you think that the provisions of the Lambeth Act are perfectly sufficient for the protection of the public against canine madness?—Hitherto it has been quite inoperative; that clause as I mentioned I discovered they never heard of it till last week, although it has been passed a good many months.

Then you have had no experience of its operation?—None whatever.

Have you any legislative measure to recommend upon the subject?—I have seen a scheme of the Bill brought in by Mr. Alderman Wood, which it appears to me will meet the purposes. There is one thing, however, I would wish to suggest, which may not have occurred to gentlemen, that we are exceedingly at a loss as to the mode of making compensation to people who are bitten. A poor man comes and says, "I have been under the care of a surgeon, I have lost my work, and the surgeon tells me I shall not be fit to work for three weeks." What I should propose would be, that we should be at liberty to order the owners of the dogs, provided they have means, to make compensation to the party, the amount of that compensation to be left to the discretion of the magistrates.

How high a sum would you propose that the magistrates should have the power to inflict, in a summary way, upon the individual, the owner of the dog?—Five pounds.

Is not that the amount to which the magistrates can go as to an assault?—Yes.

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Then you would advise, as far as five pounds, that the magistrate should have the power to award compensation?—Yes.

There is a power in the Bill that one magistrate should be at liberty to issue his ban to the dogs, do you not think it would be better to entrust it to two?—There can be no objection.

Do you think it would be possible to subject the dogs to an assessment which belong to persons who are lodgers, or who are living in obscure parts of the town, for instance, in St. Giles's, who have not any houses that are assessable, whether it be possible to make those persons assessable for dogs who have no houses for which they are assessed, and are not assessed for any thing else?—It would be difficult.

What would you do with the pauper?—We can do nothing with the pauper. The answer which I give to the question put to me is, that all dogs should pay something, which would have the effect of diminishing the number of dogs; when it appears that a dog has bitten a person, and the owner of the dog, upon the examination of the magistrate, is not able to show that he pays the dog tax, he should be liable to a fine; when they come before us, they always say, we pay no tax, when we ask them, and it turns out that they do not pay any tax, they are very glad to get out of the way as fast as they can.

Do you not think that dogs, in a crowded town, are a great nuisance when in a state of sanity?—Yes.

Have you any reason to believe that the number of dogs, of late years, has increased in the metropolis, or that part of the metropolis with which you are particularly acquainted?—I cannot form any opinion. To show the difficulty that we have been placed in at Union Hall, about a month ago, and during the public excitement upon the subject of mad dogs, we had a meeting together, my colleagues, Mr. Chambers, Mr. Swabey, and myself, to see what was to be done in this very great difficulty; we thought the best thing to be done was, to paste up a notice throughout the whole of our district, which contains a population of very nearly 300,000 persons, warning all persons to tie up their dogs; we then consulted who was to sign the notice; but we dare not do it, we all refused to put our names; we spoke to our chief officer or high constable, and he said, if we requested it, he would put his name, if we thought proper to sanction it; we said certainly we could not; it went anonymous, and that produced the effect we expected; the dogs almost all disappeared, and at that time we heard nothing of the dogs, or of persons being bit.

Do you not think it would produce a beneficial effect, if you had been given the power?—Certainly; that is the reason I mention it; that we may have some power to do that which we have done without power.

David William Gregorie, Esquire, called in; and Examined.

WHAT are you?—I am a Magistrate; I have lived at the house at the police office, Queen-square, Westminster, for six years and a half.

D. W. Gregorie,
Esq.

Have you had lately a very considerable number of applications by persons who have been bitten by dogs?—Four men came in about a month ago; and since I have had the note sent to me, I have inquired of the clerk, who stated to me, that there have been ten in all in the course of the summer; I mean within the last five or six weeks.

Could you compare that with any previous period; for instance, last year; and say, whether the number has increased?—I think it has not at Queen's-square.

Do you know whether any of the dogs who have bitten the persons have been proved to be mad?—No; those four men that applied to me came in directly one after the other; I think they must all have been bitten by the same dog; that dog was killed upon the spot, by the mob who followed him.

Was that application to you for recompense for the injury done to them?—The application generally was to know, whether we could aid them in obtaining satisfaction for the injury done to them; we had no such power, and we always regretted it.

You have heard Mr. Hone's evidence upon that point; do you agree with him, that a demand to the amount of a given sum would be proper?—I think it would be exceedingly useful indeed; it would be enforced continually, which would show the great use it would be; and complaints have been made at all seasons of the year of people being bitten by dogs, but more in summer than at any other period.

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Do you suppose that if the public knew they had a remedy, that the applications would be more numerous?—I am sure of it.

Do you conceive that a summary power of awarding compensation would be a sufficient legislative remedy, considering the present state of alarm in which the metropolis is?—I think it would be sufficient.

Are the persons that come before you with their dogs, persons in a situation that ought to be keeping dogs for any particular useful purpose?—There are a great many low characters in Westminster who keep dogs without any good reason for it.

Is there any remedy you would recommend as a legislative remedy?—I think the power of compensating, to the extent of 5*l.* or 10*l.* if the Legislature would entrust it to the magistrates, would be quite sufficient. The difficulty would be to prove the ownership; I do not know how, in many cases, the owner of the dog would be found out, especially when they have been guilty of an offence, it would be more difficult to discover the owner.

Would you advise that the owner of the dog should be fined, unless he happened to have a collar with the dog?—I cannot help feeling there would be a difficulty in discovering whose dog it was; if a man applies, and tells us he is bitten by a stray dog in the street, there is no compensation, unless you can find the owner of that stray dog.

What legislative remedy would you propose as applicable to the stray dog?—I can see none, unless they are forced to wear collars.

Do you think that the collar would be a sufficient protection; would they not sham names?—It would be open to that, certainly.

Would you recommend an Act of Parliament, to require that all dogs should have collars; would there not be some difficulty to ascertain to whom the dogs belonged that had not collars, and would it not be as difficult as it is at present to find the owners of the dogs?—If there should be an Act that all dogs should have collars, you must put a penalty on the owners of dogs not having collars.

Would there not be the same difficulty in ascertaining the owners of dogs, to inflict the penalty for not having collars, as there would be when the injury is done?—There would; I am afraid there would be a difficulty in proving the ownership of the dog who had bitten a man, and that man applied for compensation.

Have you not had many persons making complaints, who have been bitten by stray dogs, where the owners cannot be ascertained?—Before they apply, they ascertain against whom they are making the application.

Do you know of any mad dogs in your district?—No, I never saw or heard of a dog actually mad; the dogs were supposed by the parties bitten to be mad.

Have you known any case of hydrophobia?—No, not within my own knowledge.

Benjamin Travers, Esquire, called in; and Examined.

Benjamin Travers,
Esq.

ARE you a surgeon?—Yes.

What length of hospital and general practice have you had?—I have been fifteen years surgeon to St. Thomas's Hospital, and upwards of twenty years engaged in practice.

Have you met with instances in the course of your practice of hydrophobia?—I have.

Is it a frequent occurrence?—No, very rare.

Is it more frequent now than it used to be?—Not in my experience.

How many cases have you met with altogether?—I think ten, as far as my recollection serves me.

Is the disease so peculiar, and so well known by the information you obtain from the first symptoms till death, that a well-informed medical man can have no doubt of the nature of the complaint?—I should say, no medical observer, who has seen a single instance of it, could mistake the disease.

Some of the symptoms of hydrophobia exhibit themselves in other complaints?—Certainly.

Then non-medical persons would be apt to call that hydrophobia which might be a distinct complaint?—Yes, probably.

Could you mention any disease like hydrophobia?—The *tetanus* most resembles it; but the symptoms are so peculiar, that I much doubt if any intelligent observer, professional or other, could be deceived, who had seen one genuine case of hydrophobia.

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But there have been medical men of eminence who have denied the existence of such a complaint as hydrophobia, and who have considered the cases of it on record as ill reported descriptions of some other disease?—I should say, such persons never saw a case of the disease; and further, that they were persons whose minds were disposed to scepticism.

Did not an instance occur lately of a death from hydrophobia in St. Thomas's Hospital?—It did.

How long ago?—At a guess I should say six weeks, it might be two months.

Did you see that case?—Yes, I did.

Is that the only case you are aware of in this year?—The only case.

How many cases have come under your notice in that hospital altogether?—I should think in that hospital, and the adjoining hospital of Guy's, I may have seen five cases.

In twenty years?—Yes.

Are not those two the largest hospitals in London?—Together they are larger than any other single hospital, but St. Bartholomew's is larger than either of them.

Have you heard of any other instances occurring lately of hydrophobia?—I have heard as we all have heard, but I have not met with any other well authenticated case.

Would you not have heard of it if any such had occurred in the London hospitals?—I have little doubt but that I should have heard of it from the extreme rarity of the disease, and the great interest it excites in medical men.

What species of dog was that party bitten by?—I believe a terrier, but the previous history was not distinctly made out. Many persons bitten have applied of late at the hospitals, because every person who has been bitten is now alarmed.

Have you any doubt that that was a case of hydrophobia?—Not the slightest.

Was any thing done for him as to cutting out the part, or any thing of that sort, before you saw him?—I believe not. Certainly not in the hospital; because the disease was then established. In a former case, I cut out the part after the symptoms of the disease had appeared. The man bore the operation with astonishing fortitude, but he fell back and died, as if from exhaustion, immediately on its completion. This man had been bitten three weeks before by a cat, and was brought to the hospital on the appearance of the symptoms.

Have you had instances of people coming to be cut and burnt as soon as bitten?—Many.

Have they considerably increased of late?—Decidedly. I will mention a fact to the Committee, to show how the public mind is influenced by the prevailing reports. There is a girl now under my care in the hospital, who has been bitten in the leg by a dog, and she has been seriously ill in her general health, which was not at all disordered upon her admission. I find, upon inquiry, that her mind is distressed with the apprehension that she may become the subject of hydrophobia, although she is assured the dog is alive and well; and similar cases have occurred in which, before the patient's mind could be set at rest, it has been necessary to produce the dog to convince the patient that it was not mad. Mr. Hunter mentions a case of this kind. This girl, the sister of the ward informed me, has fallen into a low state of spirits from mental apprehension; her ill health certainly does not arise from the injury.

Do you consider that excision, when tried before the symptoms appear, is generally a perfectly efficient remedy?—I should say the only remedy on which to depend, and generally efficient, not always.

What is the longest time in which you think it is possible for it to have a good effect?—There is reason to believe that it would be right to remove the part at any period before the appearance of the disease.

At what time would it be inefficient to cut out the part?—I think it would be inefficient upon the accession of spasms.

Do you think, between the bite and the symptoms showing themselves, the probability is, there would be a beneficial effect produced by excision?—I think so.

Do you think that the virus is immediately taken into the circulation?—Certainly not.

Do you think it remains morbid in the part for any length of time till a disposition arises to receive it?—What we call a specific irritation is communicated by the saliva, and then the morbid poison is secreted.

Must that irritation arise first, in order to receive the virus into the circulation?—That irritation must exist in order to form the virus. The poison of hydrophobia

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is formed in consequence of a specific irritation set up by the saliva of the dog; the morbid poison is formed by the human system in consequence of the inoculation with the dog's saliva.

Do you think that the dog emits a certain portion of virus into the wound?—If by virus you mean saliva, I do.

Is it not that virus which creates the irritation; do you think that there is any new formation of virus that takes place; or is it the same virus transmitted from the dog?—I think there is a new and morbid secretion, in consequence of the specific irritation communicated by the saliva of the dog.

What time, in your experience, having seen so many patients, what is the general length of time, after the party has been bit, up to the time that he is affected by hydrophobia?—I should say, varying from ten days to three months, as nearly as I can form an average.

Have you known many above three months?—No.

Have you heard of a case of twelve months; do you consider that as an authentic case?—I have heard of such a case, and which was generally regarded as well authenticated. If three months may elapse, I do not know why twelve months may not elapse.

Is that accounted for by medical men?—No; the subject of morbid poisons is altogether obscure; and this is a disease *sui generis*.

You have heard of cases occurring a very considerable time beyond three months, though you have not met with them?—Yes.

A case has been mentioned as being on record, of a father dying of hydrophobia, and taking leave of his children; and he kissed one of them, and that child took the disease of hydrophobia; do you not think that one of these circumstances must have been the case, either that the child itself must have been bitten, or that there must have been a sore upon the child's mouth; do you think that the disease was communicated by the father to the child?—I should greatly doubt it. I do not mean to say that it is an absolutely incredible statement; but I should require, in order to satisfy my mind, the most full and particular evidence of the fact. I should find great difficulty in admitting that the natural secretion of one person was capable of communicating the disease of another. The saliva is a natural secretion from the blood; I do not believe that the poison is transmissible from one human subject to another. Suppose a man affected with symptoms of hydrophobia were to bite another man, I should not expect he would communicate any disease.

Is not the whole subject of hydrophobia one exceedingly little understood by medical men?—Undoubtedly.

Does not that arise chiefly from the circumstance of its being so rare?—Certainly; it occurs so seldom, that it excites an over-eager curiosity, which interferes with the treatment; it is a case in which very little time is allowed for the trying of any remedy; and whenever any remedies have been fairly tried, they have been found inefficacious. The opportunities of becoming perfectly acquainted with the disease are extremely limited.

Do you think if rewards were offered by the Legislature, as in the case of other diseases, for the discovery of a remedy; do you think this is a case in which any good would be done by a measure of that kind?—I think not; the benevolent feelings of the Profession require no incentive.

Can you from experiments state whether the virus of the rabid dog can be taken into the stomach of another dog, or a human individual, without affecting that individual?—Not from actual experiments; but I have heard the fact stated, and think it extremely probable, as it is conformable to what we know of other poisons, the viper's poison, for example.

Is there any thing that you would suggest to the Committee by way of legislative remedy for the prevention of this?—The especial result of all my observation of the disease is, that the excision should be performed thoroughly, and the earlier the better; but, at all events, it should be done at any period before the accession of the symptoms. If it is a case in which the knife cannot be so employed as entirely to include the bitten part, a strong caustic should be used, and, if possible, this should be rendered obligatory upon medical men in every case in which they conceive the slightest suspicion exists as to the state of the dog.

You have said, although cases of actual hydrophobia are very rare, yet you have known cases, and you have mentioned one particularly, of great alarm and depression of spirits, which had arisen in consequence of the bite of a dog, from the apprehension of hydrophobia. Now, with reference to that part of the subject,

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do you not think it might be desirable to take precautions to prevent the multiplication of dogs, and consequently to the liability to this calamity from their bite?—I certainly think it would. My own belief however is, that a very large proportion of the dogs reported mad are not so.

From the effect produced on the public mind, and its great influence and mischievous effect upon persons who have been bitten by dogs, do you not think it would be desirable to take some measures to prevent, as far as possible, the liability to that calamity?—It strikes me, and this is my answer to the question, “Whether any legislative assistance could be given?” that the right way would be, to afford some additional facilities or encouragement to the study of the disease in dogs. If we were better acquainted with the pathology of the species, I think we might probably arrive at some means of exterminating the disease *in toto*.

In what manner do you think that could be best done?—I should say, by the institution of a society of competent medical men, for the express purpose of studying the character of the disease, so as to distinguish it from the distemper, and other diseases which have no injurious action beyond themselves. We might thus arrive at the most efficient treatment of it, especially if the same parties were authorized and directed to inspect and treat all cases of the malady occurring in public institutions, and to communicate their observations at short intervals to the profession at large.

Mr. John Ody, called in; and Examined.

WHERE do you live?—In the Strand.

Have you recently noticed a considerable number of dogs kept by a class of persons who appear to have no occasion for them?—A great number of them.

State what has come under your knowledge?—When I walk from my house to the stable, in the morning, I count from fifteen to twenty dogs, all of which I presume are kept by paupers, and persons keeping apartments.

By apartments, do you mean persons living in only one room?—One or two rooms.

In buildings where there is one room above another?—Yes.

Those buildings are divided into tenements?—Yes.

Do each of the persons inhabiting those tenements keep a dog?—I do not know whether each of them do; there are frequently one or two standing at the door, and I have been told that they belong to the first floor and second floor.

What are those persons?—Generally labouring men; some shoemakers, and some tailors.

Are they persons to whom it would be an oppression to put a small tax?—I think if there was a tax imposed they would not keep a dog at all.

Have they any use for the dogs?—No, they have not.

Are they turned out in the morning?—They are turned out about seven o'clock to get their living where they can find it.

If a tax was imposed upon dogs, would there be any difficulty in collecting the tax?—I apprehend they would destroy the dogs immediately.

Your opinion is they would not then keep the dogs?—Certainly not.

How can you tell by the sight of a dog whether a duty is paid upon the dog or not?—My opinion is, that each dog should have a collar, with the owner's name and address upon it, and the dogs found without that should be destroyed.

Have you ever heard of any dogs having bit any person, any child, in that particular neighbourhood?—I have not seen them.

Have you not heard of it?—No, I have not; the persons who keep them, a great many of them receive parochial relief.

Edward Thomas Handley, called in; and Examined.

WHAT are you?—I am an officer of the Queen-square police.

Have you been so many years?—Yes, ten years.

Have any cases come to your knowledge latterly of dogs having bitten persons?—There were three or four who came to our office one day, who, by their account, were all bitten by one dog. We have many complaints every week of persons being bitten by dogs, but I have not heard of any case of persons dying by hydrophobia.

Have persons been taken to the Westminster Infirmary to have the part taken out?—Yes; there were three or four cases about a fortnight or three weeks ago.

Mr.
John Ody.

E. T. Handley.

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Have the number of dogs increased in Westminster of late years?—I cannot say that they have; there have always been a great number.

What class of persons generally keep dogs?—I think they are persons who have no occasion for them whatever.

Do they keep them for their amusement?—Yes; and to wander about the streets, and for fighting; but I do not think there are so many kept for fighting now as there used to be.

Do you find that the persons who keep dogs within your own knowledge are paupers?—I could not say that they are paupers, but they are of the very lowest class.

And have no use for them?—No; they are wandering about the streets to get their living.

Do those persons who come to you and complain of having been bitten, ask for any recompense?—Yes; and persons have been summoned to our office, and sometimes they make a compensation. One man was summoned, the keeper of the Scholars' Ground at Westminster, who owned the dog who bit the man, and he compensated the man by giving him a sovereign.

Do you think that you have a right to enforce a recompence?—I believe the magistrates have no power, but they issue a summons, whether it is attended to or not; they generally are obeyed, and the thing is arranged between the parties; the fighting dogs are the most harmless dogs, and the persons who keep the fighting dogs are very careful of them.

Have you any regular dog dealer about the neighbourhood?—There is in Gower-lane, Kensington, a man of the name of Sexton; his dealings are principally in sporting dogs.

Have you been much employed in endeavouring to recover stolen dogs from these people?—I have searched after some dogs, and I have recovered some; I have recovered one for Lady Strong; I traced it to him, and the dog was sent back.

Is there not a man up by Battersea Gate?—Yes, Mr. H.

Have you ever been there after stolen dogs?—No.

Do you think, if you were authorized to take all stray dogs, and keep them for some time, that could be done without inconvenience?—It would be rather an awkward task; officers would be rather shy in taking hold of dogs; there have been a great number destroyed in the Grosvenor district, and the beadles have taken possession of a large number of dogs under the Act, and I have heard them say they have destroyed above forty; they have confined the dogs, and if their owners did not come for them, they have destroyed them; they have summoned several people to our office, who have been fined 5*l.* for letting their dogs go at large.

Veneris, 9^o die Julii, 1830.

William Babington, Esquire, M. D. called in; and Examined.

*W. Babington,
Esq. M. D.*

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HAS the case of hydrophobia come particularly under your attention?—I have had an opportunity of seeing several instances of the disease, but I do not say that it has come very particularly under my consideration.

Have the goodness to describe any cases you have had for some time past under your notice?—It has not occurred to me to meet very lately with any case of this disease, and though I should be able to go a great way back in the enumeration of the cases I have seen, they are not very numerous.

Will you have the goodness to describe to the Committee what has been the progress of the disease from the time of the discovery of the person having been bitten by any animal, and the general effect on the patient during that time?—With reference to the cases which have fallen under my observation, I should say that the interval between the accidents from which the disease arose, and the occurrence of the disease itself, might be averaged at about six weeks or two months. The disease may be said to mark itself in the first instance by despondency and general indisposition, followed by very high excitement and extreme irritability, and general spasmodic seizures affecting the respiration more especially, susceptibility to excitement of every kind; as for example, to the impression arising from exposure to cold air, and to the sound, taste or sight of liquids, terminating in convulsions, exhaustion and death, the disease not in any case extending beyond the period of three or four days.

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Has there been any case within your knowledge of the disease arising from any other cause than that of having been bitten by a rabid animal?—No; the impression upon my mind is, that it never does arise from any other cause than the direct agency of its own peculiar poison.

The Committee feel that the House, in referring the question to canine madness, and the means of preventing it to their consideration, have called upon them to consider, as a measure of police justifying preventive remedies, whether the disease has or has not increased, in your opinion; and from your observation what is the fact?—I have no hesitation in saying that, according to all I have been capable of collecting, it has very materially increased.

To what cause do you attribute that increase?—To the dog being from his nature an animal more liable to this disease than most others, to his extensive intercourse with his own species as well as with other animals, and to the various causes of excitement to which he is continually exposed.

You attribute the increase of the disease, as affecting the human animal, to the increase of the number of the dog species kept in England at this time as compared with the number kept at a period thirty years ago?—I certainly think it follows, as I have said, that the greater degree of liability of the animal to disease arises from the greater extent of communication of those animals with each other, and the more extensive opportunity of inflicting the disease not only on their own species, but on many other animals. To those circumstances I would attribute what I assume to be the case, namely, the greater degree of the prevalence of the disease in question.

In your judgment it appears to be a question of proportions. Are you aware that there are countries in which dogs abound in a much greater degree than is the case in England, and in which the disease of canine madness is not understood to prevail at all?—Holding as I do the opinion, that this disease depends upon the agency of a particular poison or virus, I should alone expect that the disease would show itself where the virus or contagion existed, and would be unknown in countries where it was not introduced. I am quite aware that in Egypt, and in various other parts of the world, the inhabitants are happily strangers to the disease, which, as I have said, I attribute to the virus productive of the disease never having been introduced.

Exactly in the same way as a particular disease was not known in the South Sea Islands till the English navigators introduced it?—This has been the case with the venereal disease and the small-pox.

In places where, for instance as in India, the dogs are very numerous, and go at large without owners, the disease is known; but it is not nearly so prevalent as it seems to be in this country. To what would you be inclined to attribute that?—I can easily admit that climate may make a difference, but I should, I confess, be more disposed to attribute its greater prevalence here to the more extensive intercourse that takes place here in dog fights, and in various opportunities that those animals have of associating with each other, and the provocation they undergo.

Do you conceive that the anger excited in a dog fight renders them more liable to receive the contagion, and to convey it, than a dog not exposed to that irritation would be?—I really should think this not at all improbable; though looking all along to the existence of the particular poison, I am not of opinion that any degree of excitement would actually produce the disease.

Do you conceive, in reference to your answer to the preceding question, as to the prevalence of the disease in other countries, that temperature, and if so, what range of the temperature, may have any effect in pre-disposing the animal to the disease, to which the question refers?—If I look to the extent of the disease in our own country, in which we have a variety of temperature, I am not disposed to lay any great stress upon that circumstance, inasmuch as I do not think that it is more prevalent with us, upon the whole, in summer than in winter.

Has any cure, to your knowledge, been effectual, of the disease, when confirmed?—It does not come within my knowledge that any discovery has been made, or any mode of treatment been adopted, curative of that disease, in any instance whatever.

Do you conceive the cures reported to have been effected, have been cures of the bite of dogs which were either not mad, or the virus from the teeth of which had been previously cleaned or removed by the bite of other persons or animals?—When once the disease has shown itself in the human subject, we have not, to my knowledge, any well-authenticated instances of recovery.

Have you ever turned your attention to this fact, what number of persons bitten

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by a dog supposed to be mad really take the disease?—I know, upon what I must consider as the most respectable authority, that there exists upon that point a very extensive latitude, that whilst, on one occasion, persons, to the number of twenty, were bitten by a dog clearly rabid, of whom but one fell under the disease, it happened in one other instance, that, out of seventeen that were bitten, eleven fell a sacrifice to it.

In those cases, do you suppose any thing to be attributable to preventive measures, such as excision of the part, and that process having taken place in some of the subjects and not in others?—I entertain no doubt that preventive measures, after the application of the virus, have been effectual in a great many instances.

Can you suggest to the Committee any measures of precaution which your experience and general science may render it desirable for the Committee to receive?—In my view of the subject, I know of no security beyond that of keeping out of the reach of accident.

Does any plan suggest itself to your mind by which the public attention might be advantageously directed, aided by the inquiries of medical men, to the prevention or cure of the disease?—I am of opinion, that notwithstanding the very minute attention which has naturally been paid to that question, and the various measures that have been proposed, we are not yet in possession of any preventive or curative means, the local treatment, prior to the appearance of the disease excepted, on which any reliance can be placed.

In what proportion has the disease increased; have you any tables by which you can state that fact?—No, I have not.

Have you known of a very considerable number of persons who have been bitten recently, being brought into the hospitals or before private practitioners?—I am now so much more out of the way of seeing accidents of this kind than when I resided in Guy's Hospital, that all the recent information I have upon that subject is by communication with medical friends.

Do you think that the cutting the part, or using caustic, affords almost a certainty of the prevention of disease, after having been bitten?—It appears, on indubitable evidence, that cases have occurred of complete failure under the employment of those means, practised by the most experienced and judicious hands. I would, notwithstanding, recommend that the part should be removed (if this can be done with safety) and that caustic should be afterwards applied, as the most effectual means.

Do you conceive there has been a great increase in the number of dogs about the streets?—Yes; in London dogs are certainly much more frequently employed in drawing carts than formerly.

Do you think the exertion to which the dog is put will increase the disease?—The dog, having been once bitten, I think it not improbable that he would be more liable to have the poison of the disease called into action by any violent excitement.

Benjamin Collins Brodie, Esquire, called in; and Examined.

B. C. Brodie,
Esq.

IN your judgment has there been an increase, within the last few years, in the disease of canine madness, and in what proportion, if so, has that increase taken place?—I began to study my profession in 1801, and from that time to the year 1816, I never saw a case of canine madness, nor was there any one admitted into Saint George's Hospital. Since that period we have had several; I do not recollect how many; I have also seen some cases out of the hospital.

In the first fifteen years you neither saw in the hospital, or knew in private practice, one case?—There were cases out of the hospital of which I heard, but which I did not see. I was not so much in the way of seeing them in private practice at that time as I have been since.

The fact that there were none brought into Saint George's Hospital is clearly within your recollection?—It is.

In the last fifteen years there have been several?—Yes.

To what cause do you attribute this increase?—I do not know to what cause it is to be attributed, but it corresponds with that which we know to occur in other diseases, that they prevail more at certain periods than at others. I do not apprehend that there are more cases now than there may have been at some former period.

Do you conceive that the temperature has any effect in predisposing either the animal to become rabid, or the human subject to receive the disease?—I believe the general opinion is, that very hot weather makes the disease more likely to be produced,

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produced, but I cannot say so from my own experience; for I have known it occur at all seasons.

Have you reason to believe that there are countries in the world in which the average temperature is considerably greater than that in England, in which the increase of dogs is considerably greater, and yet in which the disease is almost unknown, the question referring to Antigua, Constantinople, Alexandria, and other countries?—I do not know any thing as to those particular countries; but it stands on record that in the Island of Jamaica the disease at one time had not been known for forty years. This was published by Dr. John Hunter, who had been a considerable part of his life in the West Indies; and nearly the same thing was communicated to me by a Jamaica gentleman, a patient of mine some years ago.

Did it after that period re-appear?—Yes; they attributed the re-appearance of it to its having been imported by some dog from the continent of America, or some other quarter.

In your judgment does the disease ever arise spontaneously, or does it in every instance arise from the bite of an animal previously rabid?—I have not arrived at any certain opinion upon that point.

Do you conceive that in any instance the disease arises spontaneously; and if so, are the predisposing causes to be sought in heat, in food, in irritation, in the non-use of water, or in any and what other causes?—I have not been able to make up my mind whether the disease does or does not ever arise spontaneously. There is a good deal to be said on one side, and a good deal on the other: first, they say that in Jamaica it has not appeared sometimes for forty years; then, when it has appeared, that they have been able to trace it to some dog which has been brought from the continent of America, or one of the other West India islands; again, it is stated that Mr. Meynell used to be very much annoyed by the disease appearing in his pack of hounds, and that for some time he took a good deal of pains to prevent it without success; at last, however, he did prevent it, by making every dog perform quarantine before he was admitted into the pack. On the other hand, it seems difficult to account for the disease in a populous country like this being so rare at one time and so prevalent at another, unless it does arise spontaneously. It has been stated that the disease, or something like it, has been given by animals that were not diseased themselves, that were merely enraged, and not actually rabid. I have been informed that a case of this kind occurred some years ago in Dublin; if the Committee wish it, it will be easy to obtain the particulars. I had a patient under my own care in the hospital, who had been hunting rats, and he had been poking at a rat in a corner with a pole; the rat and he maintained a battle for some time; at last the rat jumped out of the corner, and bit him in the thumb. The man was admitted into the hospital with some symptoms which were very like those of hydrophobia; it was a question whether it was hydrophobia or not. The man was in great danger, but he ultimately recovered. The rat ran away, so that nothing was known as to what became of him. There was a case published in the Philosophical Transactions, well authenticated, more than a century ago: the man died of hydrophobia a month after the man was bitten, and a fortnight before the man died the dog was seen alive and well. I only mention these things to show that we have not sufficient data for coming to any positive conclusion as to the disease being communicated solely by inoculation from an animal already rabid or not.

What proportion of the cases brought into St. George's hospital, or brought under notice of any medical man, as cases arising from the bite of a dog supposed to be mad, do you believe it to have arisen from the bite of a dog really rabid, and of the cases really produced by the bite of a dog rabid; what proportion do you believe to have actually taken the hydrophobia?—Ever since I have been about the hospital, either as a pupil or a surgeon we have had a great number of persons come who have been bitten by dogs supposed to be rabid; I conclude that many of those dogs were not rabid, but that a considerable number must have been so. We have always excised the parts, or we have applied caustic when we could not excise, and I have never heard of any one of those patients having had the disease afterwards. If any of them had had it we should have been sure to have heard of them.

You attribute great virtue to such means?—Yes, if the operation be properly performed; a great deal depends upon how it is done; it may be done very carelessly. The caustic may be applied by those who are not in the habit of applying it, and who do not use it sufficiently freely. I have seen two persons have the disease who had had the caustic applied, but then I suspect it was not applied in a proper manner. Among those admitted into our hospital, where it is almost always done

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by the house-surgeon, and generally done at the moment, as I said before, no single individual has ever had the disease. I may add that I have talked with other surgeons of hospitals both in this country and abroad, and had the same account from them all.

Have you had any reason to believe that any one of the dogs by which the bites were inflicted had been otherwise than mad?—I dare say the greater number of the dogs that had bitten persons brought to our hospital were not mad.

Have you known that in the cases of some of those patients who were so bitten, the dogs have afterwards died rabid?—Yes, I cannot doubt it. They very frequently have sent the dogs to us to dissect, and we have found such appearances as proved them to have been rabid.

Would it be safe almost at any time before the disease had appeared to apply the knife or the caustic?—There can be no harm from it. It must be safe at any rate; and I should apply it certainly at any time before the symptoms had shown themselves, because I do not know when the operation ceases to be useful.

Can you suggest to the Committee any measure of precaution as a measure of police which it might be desirable to adopt either for the prevention of the disease, or as the means of assisting in its cure by directing the public attention to the disease and to the remedies?—I suppose, with respect to the prevention of the disease, nothing can be done better than giving the proper authorities a power of ordering the dogs to be chained up or muzzled. I have been told this morning, that in Italy, where the disease prevails, there is an order of the police that all dogs should be muzzled, and that dogs-meat is put about the streets with poison upon it, that the dogs not muzzled eat the meat, and are poisoned.

Do you think, from your own knowledge, that as the disease generally arises from the bite of rabid dogs, the number of dogs has become greater since 1816?—The probability is, I conclude, that dogs are not so common as they were before the tax was imposed on them; the tax was, if I recollect right, put on at a period when the disease was supposed to prevail, and with a view to lessen the number of dogs.

You are not aware, perhaps, that persons not taxed for windows are not taxed for dogs?—I was not aware of that.

You are aware, probably, of a proposal to form a society to be formed of medical men, with the offer of rewards for the means of prevention or cure of the disease; what is your opinion?—I cannot see that any good is likely to come from it. You can offer no greater reward than is offered already; for whoever discovered a cure for hydrophobia would obtain fame and fortune by his discovery. The absolute number of persons who die of hydrophobia, as compared with the mass of society, is small; but the chief thing from which society requires to be delivered is the alarm which they are under on the subject. I recollect looking over all the cases I could meet with published in our language, and I found some where I was satisfied that the patients had died of the mere terror. The state of anxiety in which I have seen people in over and over again, after having been bitten by strange dogs is a very serious evil indeed. I have known such persons completely miserable for months together.

Alexander Thomson, Esquire, M. D. called in; and Examined.

A. Thomson,
Esq. M. D.

HAVE you had a case very recently of a child under the disease of hydrophobia?—I have at present under my care a boy, who has been recently bitten by a dog, but has not yet demonstrated any signs of the disease. I was called in to express my opinion regarding the morbid appearances in another case some time since, in which I carefully examined the body of the patient, and also that of the dog by which he was bitten.

Have the goodness to state that case as it occurred, to the Committee?—A little boy about seven years of age, while walking along quietly through Lisson-grove, was suddenly bit by a dog, which rushed out of the gate before a gentleman's house, no provocation having been given by the child. The part bitten was the interior of the right knee.

What steps were taken immediately?—An alarm was immediately given, and although the master was urged at least to confine the dog, yet he refused to take any precautions whatever. The child was taken to the first medical man, who immediately, and as he thought in the most efficacious manner, applied lunar caustic (nitrate of silver) over the surface of the wound. The child went home, and took some aperient medicine on the next day, at the request of the same medical attendan.

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Mr. Frankum, surgeon, of Lisson-grove, being now sent for, observing that the wound was only superficial, that is, cutaneous, and finding, upon inquiry, that the dog had hitherto betrayed no symptoms of rabies, thought it necessary to do no more to the wounded part, which had been rather painful, than apply a blister over the eschar. The child, during the day, had displayed symptoms of drowsiness and irregularity of mind, a desire to retire, to abandon his usual occupations, and appeared to be affected with all the symptoms of a slight fever.

How long was this after the bite?—These appearances occurred on the afternoon ensuing that on which he was attacked by the dog. The febrile excitement which I have described, began during the night on which he was bit, at about midnight, but became much more conspicuous on the ensuing morning. The fever abated slightly during the day, so as to allow the child, for a short period, to regain its wonted liveliness, but soon returned with increased violence. Mr. Frankum administered liberally the medicines which he deemed desirable, viz. calomel with antimony; under the use of which the symptoms were in no degree alleviated, but gradually grew more and more embarrassing until the morning of the fourth day, on which a manifest change for the worse was observed. About four A. M. of this day, was the last period at which he was enabled to swallow. From this time forward he sedulously avoided all sorts of fluid, any one of which, when put even to his lips, threw him into violent convulsions. They succeeded now and then in introducing toast and water into his mouth, but the effort which he made to swallow it was followed by the most frightful contortions, characteristic, as far as regards the nature of the convulsions, of the disease, hydrophobia. Anxious to have some assistance from a medical man, and desirous of dividing the responsibility with another, Mr. Frankum consulted Dr. Conolly, who did not however arrive till collapse, fatal collapse, the result of the incessant convulsion, had supervened. Dr. Conolly soon perceived that there was no hope whatever of his recovery, and left him to tranquillity.

There were no steps taken to cauterize the wound again?—No; Mr. Frankum finding that the symptoms had already displayed themselves, considered it unnecessary, either to excise the wounded part or to recauterize it, it being a principle with medical men that it is of no use to do any thing of that kind after the poison has begun to act upon the system, or has begun to work.

How long did the child linger before he died?—Three days; he died upon the fourth day after that upon which he had been bitten; the symptoms in his case displayed themselves unusually early, and ran an unusually rapid course.

It was the opinion of Dr. Conolly, yourself and Mr. Frankum, that the child died unquestionably of hydrophobia?—Yes; they sent for me to examine the body of the child, and from the circumstances related to me, compared with the morbid appearances, which I found (and which may be seen preserved in the Museum of the London University,) I have no hesitation in answering the question in the affirmative; they have expressed a similar conviction.

There was no doubt whatever as to the dog being affected with disease?—No; such was the conviction also arrived at by the jury at the coroner's inquest, which was held in consequence of the dog not having displayed any symptoms of hydrophobia, or as the disease is called in the dog, of rabies, unless indeed this viciousness could be considered in such a light; the dog remained equally kind to his master, and if any thing had of late taken his food with more than ordinary alacrity. The coroner particularly and solemnly urged that the dog might be preserved, in order that we might see how far the symptoms of hydrophobia would develop themselves. The master, however, who had behaved ill throughout the whole transaction, having not only refused to confine the dog, but to permit of a physician being called in to the patient, neglected with equal recklessness the injunction of the coroner, and hung the animal next day. An examination of the body of the dog took place immediately afterwards, in the presence of Dr. Conolly, Professor Pattison, Mr. Frankum, and myself, under the superintendence of Mr. Youatt, one of our best veterinary surgeons, residing in Nassau-street; every part of the dog except the spine was examined very minutely and anxiously, in order that no doubt might remain of the true nature of the case. In the child I had examined even the spine.

Mr. Youatt pronounced that the dog was absolutely rabid?—No; but he expressed his conviction, in which he was joined by all present, who had witnessed the bodies of dogs who had died of rabies examined, that the morbid appearances were

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such as could only occur in rabies, or such as were to his knowledge found under no other circumstances.

Of what breed was the dog?—I am not sure; the examination of the body of the dog had commenced previous to my arrival, I was therefore too much interested at the time to notice this circumstance, but the dog was of considerable size, and I am informed was a mongrel spaniel.

Have you had, since your introduction into the profession, many cases of the same nature?—No; I never had a case under my own treatment, but from the circumstances of my father and my friends having had several, and from the general interest felt upon the subject by all persons, I have attended very much to all the cases which have been of late published, and particularly to the masterly cases related by Dr. Marshall in his *Morbid Anatomy of the Brain*. The only instance in which this dog displayed any symptom which could be referred to rabies, was the act of biting the child, though it was not used to be snappish, nor did he display any symptom subsequently to the bite, at least none was observed. The animal was killed as a measure of precaution.

From the facts of this case it is clear that a state calculated to terminate in rabies may exist in the dog, without exciting any symptoms that shall appear remarkable to bye standers, and that in such a state a bite from the animal may excite in the human being the disease called hydrophobia. I should deduce the same inference from my reading generally. I wish therefore to suggest to the Committee the propriety of

1st. Obliging all dogs to be kept muzzled during certain periods of the year, May, June and July.

2d. To cause all dogs, who may have bitten any one, whether in a rabid state or not, to be put by their masters under the surveillance of a public officer, till such time as he declares them to be harmless.

3d. To permit all dogs whatever, whether with masters or not, that may be found unmuzzled in the street during the above named periods to be put to death.

I am sure moreover, that there can be but one safe way of treating such cases, viz. to cauterize the wound, after having excised the bitten part. As a general rule this should never be omitted. I have therefore made it a rule never to allow of any patient coming under my care, with a possibility of getting the malady, unless the friends will consent to the operation. I followed this rule in the case of the boy mentioned already as now under my care, cut out the parts, and cauterized the surfaces of the wound well with lunar caustic. The boy is doing well.

John Morgan, Esquire, called in; and Examined.

John Morgan,
Esq.

THE Committee understand that you have paid considerable attention to the subject of canine madness?—I have paid particular attention to the subject of poisons generally, but not to the subject of canine madness.

Is it within your knowledge that there has been an increase of the disease of hydrophobia within a recent period?—In dogs, certainly; but not that I am aware of in the human subject.

To what cause do you attribute that increase of the disease in dogs?—That is a question that I have some difficulty in answering, because I am not quite certain whether the disease is produced by inoculation, or arises spontaneously; it is a disputed point. I am not in possession of a sufficient number of facts to determine that point.

You are aware that in some climates dogs in much greater numbers than abound in London are constantly at liberty; that in those climates the Committee refer to Lisbon, to Constantinople, and to Alexandria, the dogs roam, finding their own food, and without any disease arising amongst them, producing in themselves or in others anything like hydrophobia?—I am aware of those facts.

Do you conceive that any degree of temperature is connected with the existence of this disease, and if so, within what range of temperature do you suppose the disease to be possible?—I am not aware of the extent of the country over which hydrophobia is at present known; but from the facts which have been stated by others, and from the circumstance of my never having met with a single case of spontaneous hydrophobia, I am induced to believe that it arises from inoculation, but I should not wish to speak positively upon that point.

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In that case you would suppose that the non-existence of the disease, supposing the fact to be so at Lisbon, at Constantinople and at Alexandria, arises merely from the fact that no such morbid poisons have been introduced by other persons?

—Yes, exactly so.

You mean by spontaneous disease, that in no case you have known a dog to exhibit it whom you could not prove to have been bitten?—Or to have been exposed to the liability of being bitten by being left at large; that I had never known a dog completely excluded from other dogs, which had become subject to hydrophobia.

The Committee are to understand that the preponderance of your own opinion is, that it is a disease to be communicated solely by the bite of another animal previously rabid?—I am disposed to believe so.

Has any remedy been suggested, within your knowledge, for the disease, or any prevention of its worst consequences when the disease has been communicated?—Many unsuccessful attempts to find a remedy have been made after the disease has appeared, but I should consider that the only perfect prevention would be a quick excision of the part and its cauterization.

What proportion of cases have been brought to Guy's hospital within the last few years in which you conceive the disease of hydrophobia to have taken place distinctly; and of those cases what has been the proportion of fatal termination as compared with the cases in which the bite was inflicted by the same dog, and no fatal termination ensued?—I have met with, I think, but I will not speak positively upon that point, six cases of hydrophobia since I have been surgeon to Guy's hospital; and I think, when I say I have excised wounds inflicted by dogs upon the human subject in forty cases, I speak within compass.

What proportion of the dogs do you suppose to have been mad?—I suppose that all were mad who communicated the disease to others, that a dog not rabid is incapable of communicating hydrophobia to the human subject.

Do you believe, that of twenty patients brought to the hospital under the idea of the dog being mad, the greater proportion had been bitten by dogs which were not mad?—I have no doubt that two-thirds were bitten by dogs which were not mad.

Then the number of persons whose wounds have been excised would not give a correct idea of the number of persons who have been bitten by mad dogs?—Certainly not.

Can you suggest to the Committee any measure of police as a prevention of the extension of the disease?—I have reason to believe, though I am not perfectly certain, that the disease is communicated only by inoculation; I should think that if that were proved to be the case, it would not be very difficult to put a stop to the disease, or at least to prevent its frequency; I should say, that if all dogs found at large without collars were ordered to be destroyed indiscriminately, that if there was a fine imposed on the owner of every dog found astray, if all such stray dogs with collars were taken to some depôt in the parish as soon as they were secured; I think that such precautions would prevent any rabid dog which might be ranging about the streets from communicating the disease to others of its species without the knowledge of their owners.

You conceive that would lessen the disease very materially?—Yes, if it could be proved that it owes its origin entirely to inoculation.

That is the almost unanimous opinion of the faculty of the present day, is it not?—I should think so, and particularly of a gentleman who has had more opportunity of determining that point than myself or any other person living, I mean Mr. Youatt.

Edward Coleman, Esq. called in; and Examined.

THE Committee are informed you have had considerable experience on the subject of canine madness?—I have had many years' experience, and have seen a great deal of the disease.

*Edward Coleman.
Esq.*

Have the goodness to state what has occurred to you?—I have made up my mind on one point, in which many people, however, are of a different opinion, that the disease is often produced without contagion.

Spontaneously?—Yes; but when I say spontaneously, I believe that to arise in consequence of the fact of their being exposed to their dung and urine, and to confinement, too much feed and too little exercise; I do not believe that carrion flesh is capable of producing it, but I think it arises more from being confined, tied up, and exposed to their own dung, and their own urine, and their own breath, and also from the want of proper exercise; I believe that with hounds in kennels that

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are properly attended to, it is rather an uncommon disease; but when the kennel has not been attended to, canine madness sometimes takes place, of which I know one instance in particular: the subscription pack of fox-hounds in Surrey had the disease to a considerable extent, and there was one remarkable fact, that the dogs did not bite the bitches, nor the bitches bite the dogs; the kennel had been very much neglected; there was no water flowing through the kennel; I suggested improvements in that respect, and the disease for a length of time disappeared.

In the cases you are now speaking to, have you examined the dog after its death in any case where the dog has not been bitten?—It is impossible to prove the negative; we cannot say the dog has not been bitten, but if it did always arise from the dog being bitten, how came the first dog to be mad; but, independently of that fact it will be found, that in different parts of the country you hear nothing of hydrophobia, and then you hear of it in different parts of the country pretty nearly at the same time. Now there are many diseases highly contagious in themselves, but which are capable of being produced without contagion. The glanders can be produced, it is a contagious disease, and so is farcy, and yet it is a fact that these diseases are more frequently generated than propagated by contagion; the itch also is notoriously produced by filth, and when produced, becomes contagious; so with ship fever and gaol fever, which, when they break out become contagious, but they can be generated.

Would the glanders be produced by inoculation in the case you refer to?—I can mention one extraordinary instance which was in the Quiberon expedition; there were a great many horses examined prior to their going out, and not one of them had any apparent disease; they were put on board different transports; they encountered a hurricane; they were obliged to put down the hatches; several horses were suffocated, and great numbers of them became glandered in consequence. At Dover, in the year 1796, where there was a great encampment, the government could not get stables to receive them late in the Autumn; they built close and confined stables; and the most healthy horses went into those new stables, and a great number became glandered, affected with farcy or diseases; a great many of them died. Many of the horses were sent to Hythe and placed in an open shed; not one of these horses became affected. It was certainly intended that animals with lungs should have an element to breathe once, and but once, and that the air should receive something from the blood, and impart something to the blood; but that when made to go several times into the lungs it produces a disease which becomes infectious. In the human subject it produces fevers and the plague, and farcy and glander in horses, the pip in fowls, and the husk in pigs.

Have you seen, in the course of your practice, a horse affected, and which died of hydrophobia?—Yes, several.

In those cases, were any of them without being bitten by rabid dogs?—None.

Was there any disposition to bite in the case of horses?—The disease styled hydrophobia is a very improper term, for it applies only to men; there is no dread of water in dogs, and there is one symptom which is characteristic of the seat of disease in the incipient state, that is, when the disease takes place in hounds, it is very common for the huntsmen to hear a dog challenge, and not to know what dog it is, though he is as well acquainted with the voices of his dogs as we are with our own voice, and on going up to the dog he finds that it was one whose voice he was well acquainted with, but totally different; this will continue for several days without any other symptom but an alteration of voice, a demonstration that the seat of disease in the early period is in the larynx, and which becomes manifest particularly in hounds. The disease in horses does not put on the same appearance as in dogs; in the dog, one of the most characteristic symptoms of the disease is that he retains a perfect knowledge of his master, and answers to his name, and will fondle his master, but bite his hand or a stick, or any thing within his reach; the dog laps his own urine, eats his own fæces, and eats brick and mortar, and these are characteristic symptoms of the disease. In horses the symptoms are quite distinct from those of the dog; it produces a degree of irritability very similar to that which might be expected from a pistol being fired off close to the head of a young horse, he continues in that agitated state of fear from all surrounding objects, pawing with his feet, anxious, and in some cases disposed to bite and to kick and to be violent, but not always bite or kick.

In the case of a bite from a horse labouring under hydrophobia, do you suppose that that would be contagious?—I doubt whether it would, I have never known a case of it, and I believe there is no case of canine madness propagated by the bite of

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of an animal, unless the teeth of that animal were intended as organs of offence and defence. There have been instances in the wolf and in the cat and in the fox, those are all carnivorous animals and defend themselves by their teeth.

Have you known of late of an increased number of dogs being bitten and brought to you?—I have heard of an increase of cases, but I have not seen one; my opinion is, that the public report is greatly exaggerated as to the number of dogs and as to the number of persons affected; I refer to the human subject.

You have no doubt that a great number of persons have been bitten by dogs?—A great number of persons have been bitten by dogs, and again a great many persons have in consequence of having been bitten become mad, but a great number of them have escaped; it is by no means a highly contagious poison, which will produce its effect in every case, many escape the disease.

Can you account for that?—Yes; the fact is, there are two circumstances always necessary for the propagation of every contagious disease, the susceptibility to be affected as well as the application of the poison; if twenty persons were inoculated for small-pox, some might take it and some not; I believe with regard to inoculation with small-pox poison, that new matter must be formed in the part or no effect will take place. The poison of the viper becomes absorbed and produces its effect immediately; if it does not produce its effect in five minutes it will not produce it at all; as to small-pox the parts are not susceptible of inflammation for many days, and you do not impregnate the system with the poison introduced, but with the poison afterwards formed. The poison being introduced into the part will not of itself alone produce the disease, so that it is necessary to have fresh small-pox absorbed before you can produce it.

Have you ever used the knife on a dog which has been bitten so as to cut out the part?—Yes; there have been many instances of their being excised and cauterized.

Have they escaped?—I have never known an instance of the part being taken out immediately after the animal has been bitten and the disease appearing, but I have known very few instances in dogs of that being done. It is a fact, with regard to this poison, that the parts in some cases are not locally irritated, we cannot explain why the poison of the viper should produce an immediate effect, and in the case of small-pox not produce the effect for many days, any more than we can say why ipecacuanha should produce vomiting and rhubarb purging, though we know the facts.

Have you any cases showing for what length of time a horse may be bitten before he shows the disease?—In all instances of hydrophobia I have seen in horses, it has been within a month, in every instance I think; but there are many cases of very long standing in the human subject.

Would you recommend any thing by way of police or otherwise, to prevent the effect of bites from dogs?—I have nothing to suggest upon that point, except a tax on people who keep dogs, that I think is the best remedy.

The number to your knowledge is very great in the streets of London and its suburbs?—Yes it is.

Are dogs most numerous in the parts inhabited by the rich or the poor?—I have a great number about me at Camden Town and Somers Town, there are a great many more in the environs of London than in the centre of London.

Do you think they are kept more by the common people and the back lanes, than in the more respectable situations?—Yes; I am of that opinion.

Gentlemen,

Royal Veterinary College, 12th July 1830.

AS I had the honour to state to the Honourable Committee of the House of Commons, on Canine Madness, that in my opinion hydrophobia in dogs is often *generated* from breathing a confined atmosphere, impregnated with an animal poison from the lungs, fæces, urine, and skin, I beg to add that hydrophobia will be generally found more or less prevalent as dogs are more or less exposed to these causes, and therefore, whenever the public mind is much excited on this subject, and dogs in consequence are *more confined*, and have not only less exercise but inhale less of the natural atmosphere, hydrophobia is more frequent. Under this impression I feel it my duty to suggest to the consideration of the Committee, the propriety of every dog wearing a collar, with the name and residence of the owner, (and in the streets a muzzle) and which would not only give a great security to the public, but when dogs become affected with hydrophobia, it would probably lead to a discovery of the history of the disease in each particular case.

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The expense of collars and muzzles would also diminish the number of dogs, and prevent the necessity of confinement, so prejudicial to the health of dogs, and so likely to produce and propagate the disease. Moreover, these precautions would prevent, in a great degree, the facility of selling stolen dogs, and in consequence diminish the crime of dog-stealing.

I have the honour to be, Gentlemen,

Most respectfully, your most humble and obedient servant,

To the Hon. Committee on Canine Madness,
&c. &c. &c.

Edw^d Coleman,
Professor.

Richard Frankum, Esq. called in; and Examined.

Richard Frankum,
Esq.

YOU are a surgeon?—Yes.

Where do you reside?—In Grove-place, Lisson-grove.

Have you had a case of hydrophobia under your care recently?—Very recently.

How long since?—Within a fortnight or three weeks.

State what the case was?—We had no reason at first to suppose that it would have been hydrophobia, the dog not presenting at all the appearance of disease; the child was bitten by a dog that appeared to be as well as any dog could be. The party whom I applied to to see the dog almost refused, stating it was quite impossible there could be any danger in the dog.

Was he allowed to be at large?—I should say at large, as there was no restriction. He could run out of the premises as he had done before; I believe the owner kept him for the purpose of intimidating the children and persons in the neighbourhood from coming near the premises.

Did you attend the child immediately after it was bitten?—I did not see the child the evening it was bitten; if I had seen it, I think I should have been able to have prevented the unfortunate circumstance that afterwards ensued; I saw it on the following morning.

What was done?—Some person was called in the same evening the child was bitten, and applied lunar caustic to the wound.

They did not excise it?—No; when I went in the morning, and saw the dog in such an apparently healthy condition, knowing that the operation would be a severe one, I hesitated whether I should or not excise the part, hoping there might be no chance of the disease; I allowed it to go on, as I expected it would, very favourably; but in a few days it proved otherwise.

Did the symptoms of hydrophobia appear very soon?—Not until three days after, which I consider exceedingly early.

What time did the child die?—As the bite took place on Wednesday evening, the child died on the Saturday evening following.

The disease, in fact, appeared on the fourth day?—Yes; and the child died in a very few hours.

You are quite positive, from your own opinion, as well as that of others who saw the child, that it died of hydrophobia?—There does not now remain a doubt upon that circumstance; none whatever. I was exceedingly desirous when the inquest on the child took place that the dog should be saved at least three weeks. The jury and the coroner very properly coincided in that opinion; but the owner of the dog, who manifested a great deal of unkindly feeling on the occasion, the instant the inquest was over, ordered his servant to hang the dog, and he was killed immediately after; the only alternative then was to have as early a dissection as possible.

That dissection he permitted?—We were obliged to do it by intimidation; by that means we obtained the dog, and he was dissected by Mr. Youatt, myself, Professor Pattison, Drs. Conolly and Thompson being present.

Were they all of opinion that the dog was in a rabid state at the time he was hung?—I can scarcely say that; in being positive I would restrict myself to this, that we found such disease in the dog as was unquestionably sufficient to produce disease in any individual, though the dog was not apparently mad when hung; the stomach was in such a state of disease, irritation and inflammation, that two or three days more would have been sufficient to have produced an ulcer in the stomach.

Had the dog any such thing as straw or brick within him?—A portion of hair and something like the appearance of rag, with straw and a large portion of bone; that

that is the natural food of a dog, but under such a state of the stomach, it would not become acted on by the gastric juice.

Had he the same state of stomach as dogs generally have when in a rabid state?—Certainly; possessing all the appearance that the stomachs of dogs do that are killed in a rabid state.

Were you present at the opening of the child?—I was. It was case of too much interest to be absent. I was in doubt whether the child's death arose from the inoculation of a specific poison or from the circumstance of the bite. On the second day I supposed there was something more than usual, because the child appeared slightly embarrassed in his breathing, without any sensible cause. I began to suspect there was something operating which I could not account for. On Saturday the child was excessively depressed, not affected as persons usually are who are labouring under hydrophobia, which is a disease that usually produces an opposite effect. He was then so much depressed, that I was obliged to order him wine and other stimulants, which he did not swallow but by force, and he was seized with convulsions after every attempt. These convulsive fits afterwards occurred spontaneously, and the child died from the exhaustion produced by them. These fits were undoubtedly the effects of a poison communicated by a dog in a diseased condition.

Were you and the other gentlemen quite convinced that the child died of hydrophobia?—The peculiar convulsions, and the difficulty the child had in swallowing any fluid so far confirmed us, that we had not a doubt of it, especially when we came to the *post mortem* examination. Then we found all the symptoms so rationally accounted for, that nothing but that disease could have produced such an extent of morbid appearances.

Was there a strong sensation at the sight of liquid?—None whatever. He had only those dreadful convulsions and spasmodic affections of the muscles of the throat about four hours before he died. I have had other cases of hydrophobia come under my notice, but they were always attended with symptoms of the most horrid excitement. The smallest breath of air would throw them into the highest state of convulsions.

Have you, from your practice, observed the disease to have increased of late years, or otherwise?—I should consider it has increased, not only from my own practice, but from what others say respecting it.

Are the number of persons who have been bitten more considerable of late, to your knowledge?—I should say a great many more in proportion; or whether it be that persons who have been bitten have hitherto thought nothing of it, and now find it necessary to apply.

Have you formed any opinion as to whether this disease is to be attributed to any other cause than the bite of a rabid animal?—Hydrophobia is a specific disease, arising from the effects of a certain poison introduced into the system by the bite of a rabid or enraged animal. It can, in my opinion, be produced in no other manner.

Do you suppose the disease may be communicated to the dog by any other means than the bite from another?—Decidedly. Any dog may engender the disease within him. That, in my opinion, forms the great objection to the number of dogs there are suffered to be at large. In our neighbourhood it is an intolerable nuisance. A number of the vilest curs it is possible to see are continually running about. Yesterday I was much alarmed, knowing the consequences which attach to such a thing. I was writing a prescription in a chemist's shop; a dog came into the shop; the persons who keep the shop have a dog which came into the room, when the stray dog instantly snapped at him. The other, though the stronger of the two, ran off, and cried as if beaten severely; for there is this singularity, that healthy dogs, though of a quarrelsome disposition, never return the bite of a rabid one. When I went out, I saw the same dog go and bite another, and I looked for a police-man to follow the dog. I watched him the full extent of the street, but was not able to see whether any other dogs were bitten. Several dogs have been bitten in our neighbourhood, and it is with some risk that I and others walk about.

Have many persons been bitten in your neighbourhood lately?—I have been obliged to operate on many. The other day I had a distressing case. The only son of a respectable man in the neighbourhood was walking with a nurse in the street; a dog came out in the most unprovoked manner, and bit the child on the eye-lid. If I had cut through the eye-lid in excising the part, I should have either disfigured the child for life, or, if I did not do it effectually, I should have left him open to the

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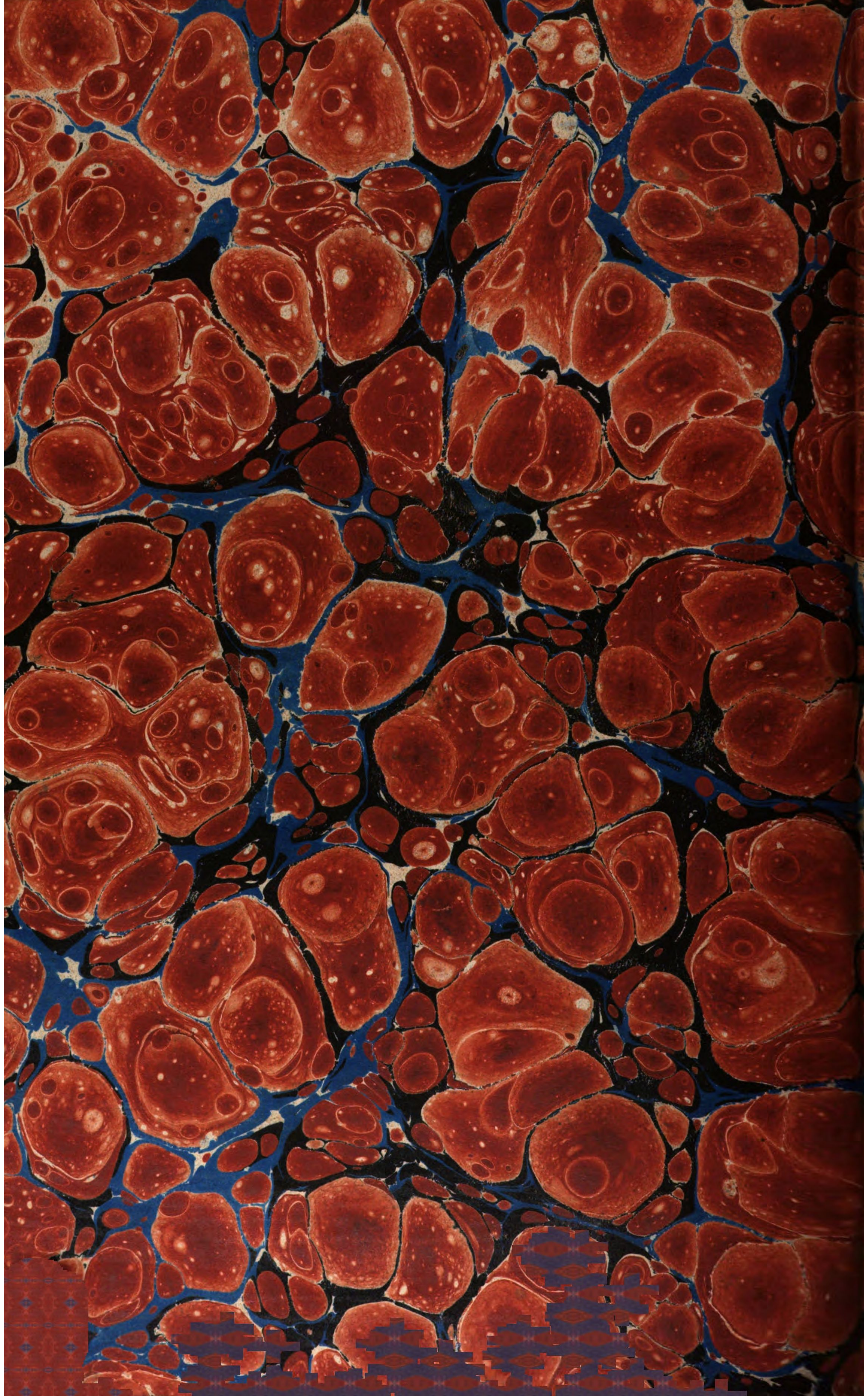
disease of hydrophobia. I afterwards cauterized it as neatly as possible, and the child, up to the present time, has done well; that is about a month ago.

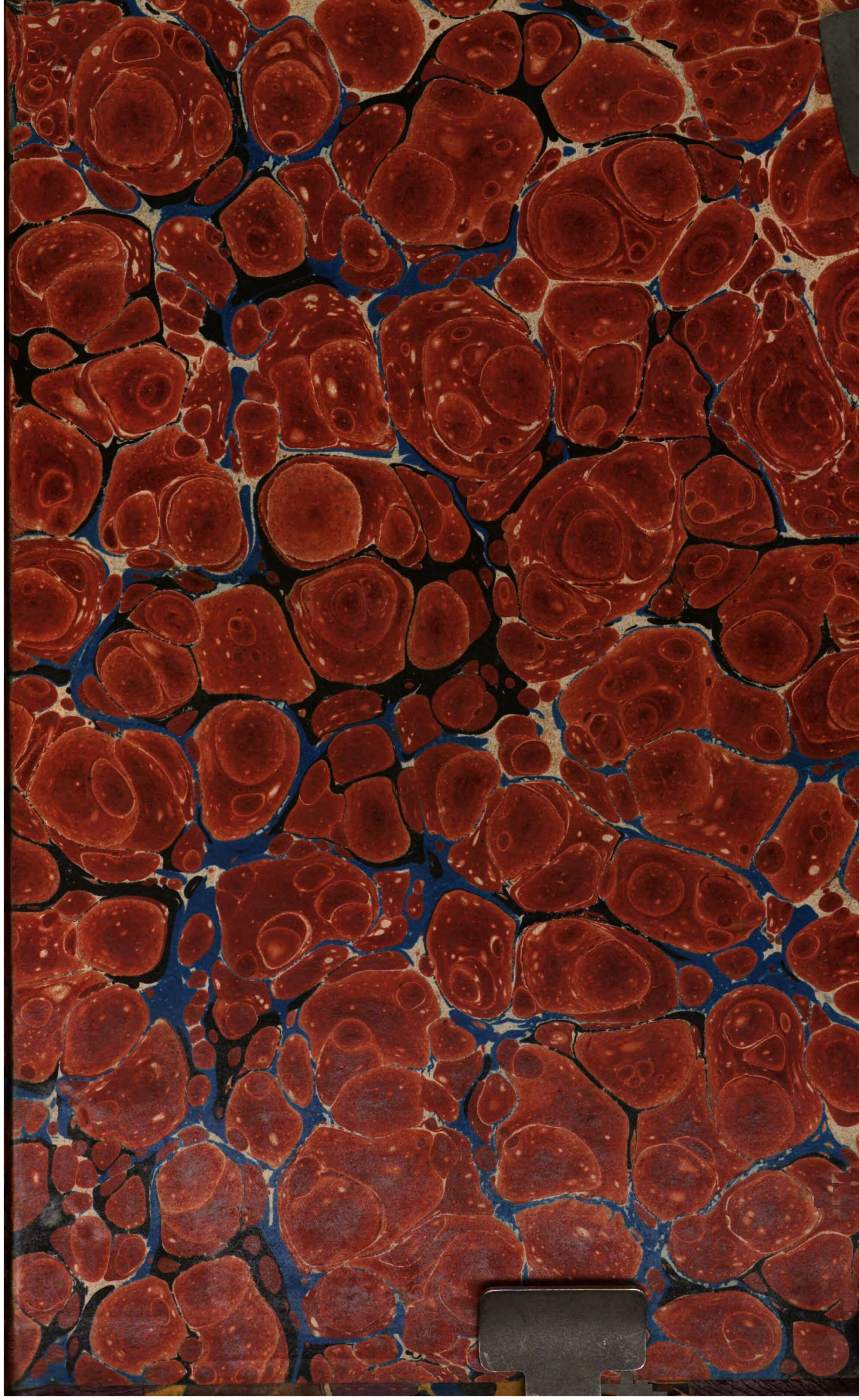
Has the dog been afflicted with hydrophobia?—We could not ascertain it, for the father instantly went out and shot the dog with a pistol. Another case has occurred within this week, which must be attended with great danger to the individual. Mr. Youatt called on me, and stated that a man applied to him who had been bitten by a dog. Some surgeon put a piece of plaister on it, and told him it would do well without further trouble. Mr. Youatt said, before he put him to the pain of an operation, he should like to see the dog. The man told him it had been killed and buried. He requested him to bring the dog as soon as possible. Next morning the man returned with the dog, and left it at Mr. Youatt's house, who found, on examination, that the dog was decidedly mad. The man not coming to him again, and thinking he had mentioned my name to him, he called on me, to inform me of it. I have heard nothing of him since, nor can I ascertain who the man is.

When a person is brought to you who has been bitten by a dog, do you think it proper to have recourse to excision?—There is no other ground of safety: it depends on the care with which the operation is performed whether the life of the individual be saved.

If a person be bitten, and you cannot find out the dog, would you, under those circumstances, not think it safe except to apply caustic and excision?—If I did not I should not be doing my duty; there is no safety without excising the part, however friendly the appearance of the dog may be. A dog may be in an incipient state of hydrophobia, and yet not manifest the disease.

Have any measures been taken in your neighbourhood of Paddington to prevent dogs from being loose?—I am sorry to say that no effectual measures have been taken. I went lately to Mr. Rawlinson the magistrate, who had ordered handbills to be issued that all dogs found at large and unmuzzled should be killed, to request if he had the power, to enforce it, by causing only one dog to be killed, stating it would do more to secure the public than a thousand handbills would; but he assured me that they not only had no power, but that they would lay themselves open to a prosecution for causing such a desirable thing to be done. There are numbers of dogs in our neighbourhood that run about the streets having no owners.







Weil, Gustav / Lewald, August / Groß, Friedrich

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